

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF PUERTO RICO

Case number (if known)

Chapter 11

☐ Check if this an amended filing

## Official Form 201

# Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name **BUILDERS HOLDING CO., CORP.**
2. All other names debtor used in the last 8 years  
Include any assumed names, trade names and doing business as names  
**DBA CD BUILDERS, INC.- 66-0591654**  
**DBA CDC MAINTENANCE GROUP, CORP.-66-0591444**  
**DBA SEE EXHIBIT E**
3. Debtor's federal Employer Identification Number (EIN) **66-0735122**
4. Debtor's address
- | Principal place of business   | Mailing address, if different from principal place of business   |
|---|--|
| <b>CARR 9945 KM 2.4</b><br><b>BO. CELADA SEC. LOS CHINOS</b><br><b>Gurabo, PR 00778</b><br>Number, Street, City, State & ZIP Code | <b>P.O. BOX 1333</b><br><b>Gurabo, PR 00778</b><br>P.O. Box, Number, Street, City, State & ZIP Code                              |
| <b>Gurabo</b><br>County   | <b>Location of principal assets, if different from principal place of business</b><br><br>Number, Street, City, State & ZIP Code |
5. Debtor's website (URL)
6. Type of debtor
- ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
- ☐ Partnership (excluding LLP)
- ☐ Other. Specify:

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

**7. Describe debtor's business** A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

## B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

## C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.

See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.2373**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

## Check one:

- ☐ Chapter 7
- ☐ Chapter 9
- ☒ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**

- ☒ No.
- ☐ Yes.

If more than 2 cases, attach a separate list.

District	When	Case number
District	When	Case number

**10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?**

- ☒ No
- ☐ Yes.

List all cases. If more than 1, attach a separate list

Debtor	Relationship
District	When Case number, if known

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

**11. Why is the case filed in this district?**

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

**12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?**☒ No☐ Yes.

Answer below for each property that needs immediate attention. Attach additional sheets if needed.

**Why does the property need immediate attention? (Check all that apply.)**

- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard?
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other

**Where is the property?**

Number, Street, City, State &amp; ZIP Code

**Is the property insured?**☐ No☐ Yes. Insurance agency

Contact name

Phone

**Statistical and administrative information****13. Debtor's estimation of available funds**

Check one:

- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

**14. Estimated number of creditors**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1-49               | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input type="checkbox"/> 50-99              | <input type="checkbox"/> 5001-10,000   | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199            | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input checked="" type="checkbox"/> 200-999 |  |  |

**15. Estimated Assets**

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000          | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000    | <input type="checkbox"/> \$10,000,001 - \$50 million           | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000   | <input type="checkbox"/> \$50,000,001 - \$100 million          | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million         | <input type="checkbox"/> More than \$50 billion          |

**16. Estimated liabilities**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> \$0 - \$50,000          | <input type="checkbox"/> \$1,000,001 - \$10 million             | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000    | <input checked="" type="checkbox"/> \$10,000,001 - \$50 million | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000   | <input type="checkbox"/> \$50,000,001 - \$100 million           | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million          | <input type="checkbox"/> More than \$50 billion          |

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

**Request for Relief, Declaration, and Signatures**

**WARNING --** Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 20, 2016  
MM / DD / YYYY**X /s/ ISMAEL CARRASQUILLO SANCHEZ**

Signature of authorized representative of debtor

**ISMAEL CARRASQUILLO SANCHEZ**

Printed name

Title PRESIDENT**18. Signature of attorney****X /s/ LCDR. FAUSTO DAVID GODREAU USDC**

Signature of attorney for debtor

Date August 20, 2016

MM / DD / YYYY

LCDR. FAUSTO DAVID GODREAU USDC

Printed name

Godreau & Gonzalez Law

Firm name

Calle McCleary 1806Suite 1-BSan Juan, PR 00902

Number, Street, City, State &amp; ZIP Code

Contact phone (787) 982-6507Email address dg@g-glawpr.com123207 PR

Bar number and State

**Fill in this information to identify the case:**

Debtor name **BUILDERS HOLDING CO., CORP.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 202**

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☐ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **August 20, 2016**

**X /s/ ISMAEL CARRASQUILLO SANCHEZ**

Signature of individual signing on behalf of debtor

**ISMAEL CARRASQUILLO SANCHEZ**

Printed name

**PRESIDENT**

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **BUILDERS HOLDING CO., CORP.**  
 United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**  
 Case number (if known): \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 204**

**Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders** 12/15

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an insider, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
AVANZA CONSTRUCTION & EARTH WORKS, LLC P.O. BOX 330025 Fort Worth, TX 76163		SERVICES RENDERED				\$101,881.25
BEXAR CONCRETE WORKS P.O. BOX 700250 San Antonio, TX 78270		LAWSUIT FOR CONCRETE				\$185,745.42
BUYERS BARRICADES P.O. BOX 7498 Fort Worth, TX 76111		EQUIPMENT RENTAL				\$111,979.15
CARTER ENERGY P.O. BOX 29106 Mission, KS 66201-1406		LAWSUIT FOR FUEL				\$146,361.44
CHICO LIMESTONE, INC. P.O. BOX 636 Bridgeport, TX 76426		LAWSUIT FOR CONSTRUCTION MATERIALS				\$64,846.01
CHOLO'S ON SITE CALLE JULIO ALVARADO133 URB. FRONTERAS Bayamon, PR 00961		TRAVEL SERVICES				\$186,517.57
F & R DESIGN GROUP, INC. HC-30 BOX 34205 San Lorenzo, PR 00754		BLUEPRINTS DESIGN				\$163,213.97

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
HALFF ASSOCIATES, INC. P.O. BOX 678316 Dallas, TX 75267		LAWSUIT FOR ECOLOGICAL PROTECTION PLAN				\$59,379.95
HOLT CAT P.O. BOX 911975 Dallas, TX 75391-1975		EQUIPMENT RENTAL				\$158,659.69
INTERNAL REVENUE SERVICE PO BOX 7346 Philadelphia, PA 19101-7346		941 - PAYROLL TAXES 1ST QUARTER 2016				\$135,641.78
INTERNAL REVENUE SERVICE PO BOX 7346 Philadelphia, PA 19101-7346		941 - PAYROLL TAXES 4TH QUARTER 2015				\$295,372.36
JOHNSON COUNTY PIPE, INC. P.O. BOX 203442 Dallas, TX 75320-3442		CONSTRUCTION MATERIALS				\$325,873.20
LATTIMORE MATERIAL CORP. P.O. BOX 732677 Dallas, TX 75373-2677		CONSTRUCTION MATERIALS				\$123,497.00
MEL'S ELECTRIC , LP P.O. BOX 40 Wilmer, TX 75172-0040		CONSTRUCTION MATERIALS				\$94,009.46
RAM TOOL P.O. BOX 743487 Atlanta, GA 30374-3487		CONSTRUCTION MATERIALS				\$111,521.71
REDI-MIX CONCRETE P.O. BOX 844425 Dallas, TX 75284-4425		CONSTRUCTION MATERIALS				\$229,310.91
SIX & MANGO EQUIPMENT P.O. BOX 1269 Frisco, TX 75034		LAWSUIT FOR CONSTRUCTION EQUIPMENT RENTAL				\$106,719.44
SOUTHWEST CONSTRUCTION 11430 NEWKIRK STREET Dallas, TX 75229		SERVICES RENDERED				\$90,253.55

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

Name of creditor and complete mailing address, including zip code	Name, telephone number and email address of creditor contact	Nature of claim (for example, trade debts, bank loans, professional services)	Indicate if claim is contingent, unliquidated, or disputed	Amount of claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
				Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
SUPER ASPHALT P.O. BOX 1849 Guaynabo, PR 00970-1849		ASPHALT				\$74,941.20
UNITED RENTALS P.O. BOX 700711 Atlanta, GA 30384-0711		EQUIPMENT RENTAL				\$86,011.70



Fill in this information to identify the case:

Debtor name **BUILDERS HOLDING CO., CORP.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206Sum Summary of Assets and Liabilities for Non-Individuals

12/15

### Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. Real property: Copy line 88 from <i>Schedule A/B</i> .....	\$ <b>1,034,000.00</b>
1b. Total personal property: Copy line 91A from <i>Schedule A/B</i> .....	\$ <b>8,694,533.93</b>
1c. Total of all property: Copy line 92 from <i>Schedule A/B</i> .....	\$ <b>9,728,533.93</b>

### Part 2: Summary of Liabilities

2. <b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 206D) Copy the total dollar amount listed in Column A, <i>Amount of claim</i> , from line 3 of <i>Schedule D</i> .....	\$ <b>6,378,451.40</b>
3. <b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 206E/F)	
3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of <i>Schedule E/F</i> .....	\$ <b>467,520.36</b>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of <i>Schedule E/F</i> .....	+\$ <b>3,689,977.52</b>
4. <b>Total liabilities</b> ..... Lines 2 + 3a + 3b	\$ <b>10,535,949.28</b>

Fill in this information to identify the case:

Debtor name **BUILDERS HOLDING CO., CORP.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206A/B

**Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents**

1. Does the debtor have any cash or cash equivalents?

☐ No. Go to Part 2.

☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **ORIENTAL BANK - CD BUILDERS, INC.** **SAVINGS ACCOUNT** **5181** **\$70.78**

3.2. **ORIENTAL BANK - CD BUILDERS, INC.** **CHECKING ACCOUNT** **0386** **\$80,175.31**

3.3. **ORIENTAL BANK - CD BUILDERS, INC.** **SAVINGS ACCOUNT** **1882** **\$1,491.00**

3.4. **ORIENTAL BANK - CD BUILDERS, INC.** **SAVINGS ACCOUNT** **7888** **\$9.30**

3.5. **ORIENTAL BANK - CDC MAINTENANCE GROUP CORP.** **SAVINGS ACCOUNT** **2049** **\$5,777.99**

3.6. **WELLS FARGO - CD BUILDERS, INC.** **CHECKING ACCOUNT** **7680** **\$21,402.74**

3.7. **WELLS FARGO - CD BUILDERS, INC.** **SAVINGS ACCOUNT** **3227** **\$928.93**

Debtor **BUILDERS HOLDING CO., CORP.** Case number (if known) \_\_\_\_\_  
Name

3.8. **WELLS FARGO - CD BUILDERS, INC.** **SAVINGS ACCOUNT** **9083** **\$8.05**

3.9. **WELLS FARGO - CD BUILDERS, INC.** **SAVINGS ACCOUNT** **7698** **\$134,688.57**

3.10 **FIRST BANK - CD BUILDERS, INC.** **CHECKING ACCOUNT** **3388** **\$12,192.54**

4. **Other cash equivalents (Identify all)**

5. **Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$256,745.21**

**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.  
☐ Yes Fill in the information below.

**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

11. **Accounts receivable**

11a. 90 days old or less: **73,156.58** - **0.00** = ... **\$73,156.58**  
face amount doubtful or uncollectible accounts

11a. 90 days old or less: **464,767.60** - **0.00** = ... **\$464,767.60**  
face amount doubtful or uncollectible accounts

11b. Over 90 days old: **5,986,081.54** - **150,000.00** = ... **\$5,836,081.54**  
face amount doubtful or uncollectible accounts

12. **Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

**\$6,374,005.72**

**Part 4: Investments**

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.  
☐ Yes Fill in the information below.

**Part 5: Inventory, excluding agriculture assets**

18. Does the debtor own any inventory (excluding agriculture assets)?

Debtor **BUILDERS HOLDING CO., CORP.** Case number (if known) \_\_\_\_\_  
Name

- ☒ No. Go to Part 6.  
☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.  
☒ Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	Office furniture OFFICE FURNITURE - SEE EXHIBIT B	\$0.00	Debtor Estimate	\$4,850.00
40.	Office fixtures			
41.	Office equipment, including all computer equipment and communication systems equipment and software OFFICE EQUIPMENT - SEE EXHIBIT C	\$0.00	Debtor Estimate	\$21,056.00

42. **Collectibles** Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. **Total of Part 7.**  
Add lines 39 through 42. Copy the total to line 86.

<b>\$25,906.00</b>
--------------------

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No  
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No  
☐ Yes

**Part 8: Machinery, equipment, and vehicles**

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.  
☒ Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			

Debtor **BUILDERS HOLDING CO., CORP.** Case number (If known) \_\_\_\_\_  
Name

47.1. **VEHICLES & HEAVY EQUIPMENT -SEE EXHIBIT D** **\$0.00** **Comparable sale** **\$2,037,877.00**

48. **Watercraft, trailers, motors, and related accessories** *Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels*

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

**\$2,037,877.00**

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No  
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No  
☐ Yes

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

☐ No. Go to Part 10.  
☒ Yes Fill in the information below.

55. **Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest**

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. <b>BO. CELADA SECTOR LOS CHINOS, GURABO PR PARCEL J WITH 0.3157 "CUERDAS", INCLUDES BUILDING, LOT 8,170 CADASTER NUMBER 200-000-002-15-000 REGISTER TO CD BUILDERS, INC.</b>	<b>Fee simple</b>	<b>\$0.00</b>	<b>Debtor Estimate</b>	<b>\$90,000.00</b>

Debtor	Name	Case number (if known)
	<b>BUILDERS HOLDING CO., CORP.</b>	
55.2.	BO. CELADA GURABO PR PARCEL LAND WITH 1,000.2599 SQUARE METERS CADASTER NUMBER 200-003-302-11-00 REGISTER TO CD BUILDERS, INC.	Fee simple \$0.00 Debtor Estimate \$30,000.00
55.3.	BO. CELADA GURABO PR SR-9945 KM 2.4. LOT NO. 1,114 PARCEL LAND "C" WITH 2.8181 "CUERDAS" WITH WORKSHOP BUILDING CADASTER NUMBER 200-000-001-24-000 REGISTER TO CD BUILDERS, INC.	Fee simple \$0.00 Appraisal \$180,000.00
55.4.	BO. RINCON GURABO PR COMMERCIAL PROPERTY WITH TWO-STORY COMMERCIAL OFFICE BUILDING. PARCEL LAND "A" WITH 999.60 SQUARE METERS REGISTER TO CDC MAINTENANCE GROUP CORP.	Fee simple \$0.00 Appraisal \$301,000.00
55.5.	JOSE DE DIEGO STREET, SAN LORENZO PR COMMERCIAL 2 STORY BUILDING USUFRUCT LAND CADASTER NUMBER 252-086-036-10-001 REGISTER TO CDC MAINTENANCE GROUP CORP.	Fee simple \$0.00 Debtor Estimate \$133,000.00

Debtor **BUILDERS HOLDING CO., CORP.** Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

55.6.	BO. FLORIDA, SAN LORENZO PR CADASTER NUMBER 278-00-002-15-000 REGISTER TO ISMAEL CARRASQUILLO SANCHEZ AND YAMILLETTE EILEEN IRIZARRY RIVERA	Fee simple	\$0.00	Debtor Estimate	\$300,000.00
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56. **Total of Part 9.** **\$1,034,000.00**  
Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.  
Copy the total to line 88.

57. **Is a depreciation schedule available for any of the property listed in Part 9?**  
☒ No  
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**  
☒ No  
☐ Yes

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☒ No. Go to Part 12.  
☐ Yes Fill in the information below.

Debtor **BUILDERS HOLDING CO., CORP.** Case number (if known) \_\_\_\_\_  
Name \_\_\_\_\_

**Part 12 Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$256,745.21	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$6,374,005.72	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$25,906.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$2,037,877.00	
88. Real property. <i>Copy line 56, Part 9.</i>	>	\$1,034,000.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$0.00	
91. Total. Add lines 80 through 90 for each column	\$8,694,533.93	+ 91b. \$1,034,000.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$9,728,533.93



Fill in this information to identify the case:

Debtor name **BUILDERS HOLDING CO., CORP.**United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known)

☐ Check if this is an amended filing

## Official Form 206D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part I List Creditors Who Have Secured Claims**

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	

<b>2.1</b> <b>KOMATSU FINANCIAL LIMITED PARTNERSHIP</b> Creditor's Name  <b>P.O. BOX 5050</b> <b>Rolling Meadows, IL 60008</b> Creditor's mailing address  Creditor's email address, if known  Date debt was incurred <b>11/19/2013</b> Last 4 digits of account number <b>1000</b> Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	Describe debtor's property that is subject to a lien <b>KOMATSU WHEEL LOADER WA320-7</b>  Describe the lien <b>Security Interest</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$79,247.67</b> <b>\$160,000.00</b>
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<b>2.2</b> <b>KOMATSU FINANCIAL LIMITED PARTNERSHIP</b> Creditor's Name  <b>P.O. BOX 5050</b> <b>Rolling Meadows, IL 60008</b> Creditor's mailing address  Creditor's email address, if known  Date debt was incurred <b>11/19/2013</b> Last 4 digits of account number <b>1001</b> Do multiple creditors have an interest in the same property?	Describe debtor's property that is subject to a lien <b>KOMATSU HYDRAULIC EXCAVATION PC350LC-8</b>  Describe the lien <b>Security Interest</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply	<b>\$94,230.12</b> <b>\$125,000.00</b>
--	---	---

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if know)

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.3 KOMATSU FINANCIAL LIMITED PARTNERSHIP**

Creditor's Name

**P.O. BOX 5050  
Rolling Meadows, IL 60008**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**11/19/2013**

Last 4 digits of account number

**1002**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**KOMATSU HYDRAULIC EXCAVATOR  
PC350LC-8**

**\$94,230.12**

**\$125,000.00**

Describe the lien

**Security Interest**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.4 MAPFRE PRAICO INSURANCE CO.**

Creditor's Name

**P.O. BOX 70333  
San Juan, PR 00936-8333**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

**AS OF JULY 2015**

Last 4 digits of account number

**1048**

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**ACCOUNTS RECEIVABLE AS OF 8/19/2016**

**\$5,160,141.00**

**\$5,686,081.54**

Describe the lien

**Security Interest**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.5 ORIENTAL BANK**

Creditor's Name

**P.O. BOX 71113  
San Juan, PR 00936-1113**

Describe debtor's property that is subject to a lien

**REAL PROPERTY BO. CELADA GURABO PR  
SR-9945 KM 2.4. LOT NO. 1,114  
PARCEL LAND "C" WITH 2.8181 "CUERDAS"  
WITH WORKSHOP BUILDING ; REAL  
PROPERTY  
PARCEL A BO. RINCON GURABO**

**\$462,349.53**

**\$481,000.00**

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known)

Name

Creditor's mailing address

Describe the lien

**Financing Statement**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☐ No

☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

**DEC 2014**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

**2.6 TRIUMPH SAVINGS BANK**

Creditor's Name

**12700 PARK CENTRAL  
DRIVE  
SUITE 1700  
Dallas, TX 75251**

Creditor's mailing address

Describe debtor's property that is subject to a lien

**HEAVY EQUIPMENT: GOMACO GP-2400 2  
TRACK CONCRETE PAVER, KOMATSU  
D65E-12 DOZER; KOMATSU PC300LC-6  
EXCAVATOR, KOMATSU PC200LC-6  
EXCAVATOR, JOHN DEERE 450H CRAWLER  
DOZER, KOMATSU PC300LC-6 EXCAVATOR**

**\$488,252.96**

**\$613,000.00**

Describe the lien

**Security Interest**

Is the creditor an insider or related party?

☒ No

☐ Yes

Is anyone else liable on this claim?

☒ No

☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred

**JUNE 4, 2014**

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

☒ No

☐ Yes. Specify each creditor, including this creditor and its relative priority.

As of the petition filing date, the claim is:

Check all that apply

☐ Contingent

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

**\$6,378,451.40**

**Part 2 List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Fill in this information to identify the case:

Debtor name **BUILDERS HOLDING CO., CORP.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206E/F

**Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims**

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

☐ No. Go to Part 2.

☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim ☐ Priority amount

2.1 Priority creditor's name and mailing address  
**INTERNAL REVENUE SERVICE  
PO BOX 7346  
Philadelphia, PA 19101-7346**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$4,780.45 \$4,780.45**

Date or dates debt was incurred  
**941 - 9/30/2015**

Basis for the claim:  
**941 - PAYROLL TAXES 3RD QT 2015**

Last 4 digits of account number **1654**  
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?  
☒ No  
☐ Yes

2.2 Priority creditor's name and mailing address  
**INTERNAL REVENUE SERVICE  
PO BOX 7346  
Philadelphia, PA 19101-7346**

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

**\$295,372.36 \$295,372.36**

Date or dates debt was incurred  
**12/31/2015**

Basis for the claim:  
**941 - PAYROLL TAXES 4TH QUARTER 2015**

Last 4 digits of account number **1654**  
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)

Is the claim subject to offset?  
☒ No  
☐ Yes

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

2.3	Priority creditor's name and mailing address <b>INTERNAL REVENUE SERVICE PO BOX 7346 Philadelphia, PA 19101-7346</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$135,641.78</b>	<b>\$135,641.78</b>
Date or dates debt was incurred <b>3/31/2016</b>		Basis for the claim: <b>941 - PAYROLL TAXES 1ST QUARTER 2016</b>		
Last 4 digits of account number <b>1654</b>		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

2.4	Priority creditor's name and mailing address <b>TARRANT COUNTY TAX OFFICE 100 E. WEATHERFORD Fort Worth, TX 76196</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$31,725.77</b>	<b>\$31,725.77</b>
Date or dates debt was incurred <b>YEAR 2015</b>		Basis for the claim: <b>PERSONAL PROPERTY TANGIBLE COMMERCIAL TAXES</b>		
Last 4 digits of account number <b>3237</b>		Is the claim subject to offset?		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

3.1	Nonpriority creditor's name and mailing address <b>A &amp; P TRUCKING 9031 PINWOOD Dallas, TX 75243</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$1,412.50</b>
Date(s) debt was incurred <b>MAY 2016</b>		Basis for the claim: <b>SERVICES RENDERED</b>	
Last 4 digits of account number		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.2	Nonpriority creditor's name and mailing address <b>A &amp; S TRANSPORT, INC. HC 08 BOX 409 Ponce, PR 00731</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$0.00</b>
Date(s) debt was incurred		Basis for the claim: <b>FOR NOTICE ONLY</b>	
Last 4 digits of account number		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

3.3	Nonpriority creditor's name and mailing address <b>A.A.A. P.O. BOX 70101 San Juan, PR 00936</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$23.71</b>
Date(s) debt was incurred <b>FEB 2016</b>		Basis for the claim: <b>UTILITIES - WATER</b>	
Last 4 digits of account number		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.4	Nonpriority creditor's name and mailing address <b>A.E.E.</b> <b>P.O. BOX 363508</b> <b>San Juan, PR 00936-3508</b> Date(s) debt was incurred <u>APR 2016</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$101.66</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>UTILITIES - ELECTRICITY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.5	Nonpriority creditor's name and mailing address <b>A1 PORTABLE</b> <b>P.O. Box 7569</b> <b>Ponce, PR 00732</b> Date(s) debt was incurred <u>MAR-APR 2016</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$481.67</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>PORTABLE TOILETS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address <b>AALC</b> <b>617 N COWAN AVE.</b> <b>Lewisville, TX 75057</b> Date(s) debt was incurred <u>AUGUST 2015 TO FEBRUARY 2016</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$22,014.16</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LANDSCAPE CONSTRUCTION</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address <b>AC EMERGENCY POWER SYSTEM</b> <b>P.O. BOX 1537</b> <b>Guaynabo, PR 00970-1537</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address <b>ACE INDUSTRIAL SUPPLY, INC.</b> <b>7535 N. SAN FERNANDO BLVD</b> <b>Burbank, CA 91505-1044</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$0.00</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.9	Nonpriority creditor's name and mailing address <b>ACME TELEVISION COMPANY</b> <b>1805 ROYAL LANE</b> <b>SUITE 107</b> <b>Dallas, TX 75229</b> Date(s) debt was incurred <u>DECEMBER 2015 TO JANUARY 2016</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$3,887.81</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address <b>ACT PIPE &amp; SUPPLY, INC.</b> <b>P.O. BOX 301282</b> <b>Dallas, TX 75303-1282</b> Date(s) debt was incurred <u>APRIL TO JULY 2016</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <span style="float: right;"><b>\$3,889.43</b></span> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known) \_\_\_\_\_

Name

3.11	Nonpriority creditor's name and mailing address <b>ACTION MOBILE</b> <b>P.O. BOX 758689</b> <b>Baltimore, MD 21275-8689</b> Date(s) debt was incurred <u>JANUARY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>OFFICE AND CONSTRUCTION TRAILERS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$787.12
3.12	Nonpriority creditor's name and mailing address <b>ACTION SERVICES</b> <b>P.O. BOX 1689</b> <b>Rockwall, TX 75087</b> Date(s) debt was incurred <u>SEPTEMBER 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,952.00
3.13	Nonpriority creditor's name and mailing address <b>ACU CONSTRUCTION</b> <b>3044 OLC DENTON RD.</b> <b>SUITE 111-113</b> <b>Carrollton, TX 75007</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.14	Nonpriority creditor's name and mailing address <b>ADP LLC</b> <b>P.O. BOX 842875</b> <b>Boston, MA 02284-2875</b> Date(s) debt was incurred <u>AUGUST 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>HUMAN RESOURCES MANAGEMENT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$167.58
3.15	Nonpriority creditor's name and mailing address <b>ADRIAN TORMES IRIZARRY</b> <b>HC-02 BOX 14740</b> <b>Gurabo, PR 00778</b> Date(s) debt was incurred <u>DECEMBER 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$964.64
3.16	Nonpriority creditor's name and mailing address <b>ADT SECURITY SYSTEMS</b> <b>P.O. BOX 71485</b> <b>San Juan, PR 00936-8585</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.17	Nonpriority creditor's name and mailing address <b>AGRI DRAIN CORPORATION</b> <b>P.O. BOX 458</b> <b>Adair, IA 50002</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known) \_\_\_\_\_

Name

3.18 Nonpriority creditor's name and mailing address

**AIR WORTH  
10728 SOUTH PIPELINE  
SUITE G  
Hurst, TX 76053**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.19 Nonpriority creditor's name and mailing address

**AIRGAS USA, LLC  
801 E NORTHSIDE DR  
Fort Worth, TX 76102-1017**

Date(s) debt was incurred **NOVEMBER 2014**

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **CONSTRUCTION MATERIALS**

Is the claim subject to offset? ☒ No ☐ Yes

**\$289.39**

3.20 Nonpriority creditor's name and mailing address

**AJ PLUMBING, INC.  
HC 30 BOX 34205  
San Lorenzo, PR 00754**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.21 Nonpriority creditor's name and mailing address

**ALCT CORP.  
P.O. BOX 1241  
Trujillo Alto, PR 00977-1241**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.22 Nonpriority creditor's name and mailing address

**ALEXANDER'S MACHINE  
3700 N COMMERCE ST.  
Fort Worth, TX 76105**

Date(s) debt was

incurred **OCTOBER 2015 TO APRIL 2016**

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **SERVICES RENDERED**

Is the claim subject to offset? ☒ No ☐ Yes

**\$14,240.30**

3.23 Nonpriority creditor's name and mailing address

**ALL-TEX PIPE & SUPPLY, INC.  
P.O. BOX 911854  
Dallas, TX 75391-1854**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.24 Nonpriority creditor's name and mailing address

**ALLIANCE GEOTECHNICAL GROUP  
3228 HALIFAX STREET  
Dallas, TX 75247**

Date(s) debt was incurred **JULY 2015**

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **SERVICES RENDERED**

Is the claim subject to offset? ☒ No ☐ Yes

**\$5,727.25**



Debtor <b>BUILDERS HOLDING CO., CORP.</b>		Case number (if known) _____	
Name _____			
3.25	Nonpriority creditor's name and mailing address <b>ALLIANCE LANDSCAPE COMPANY</b> <b>13825 AVIATOR WAY</b> <b>SUITE 200</b> <b>Fort Worth, TX 76177</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.26	Nonpriority creditor's name and mailing address <b>ALLIED FENCE</b> <b>3530 E. BELKNAP</b> <b>Fort Worth, TX 76111</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.27	Nonpriority creditor's name and mailing address <b>ALLSTATE PAVING</b> <b>P.O. BOX 140155</b> <b>Irving, TX 75014</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.28	Nonpriority creditor's name and mailing address <b>ALMONTE &amp; ASOCIADOS</b> <b>P.O. BOX 6705</b> <b>Caguas, PR 00726-6705</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.29	Nonpriority creditor's name and mailing address <b>ALPHA TESTING</b> <b>2209 WISCONSIN ST.</b> <b>Dallas, TX 75229</b> Date(s) debt was incurred <b>AUGUST TO SEPTEMBER 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,885.50</b>
3.30	Nonpriority creditor's name and mailing address <b>AMERICAN HYDRAULIC</b> <b>724 DE DIEGO AVENUE</b> <b>San Juan, PR 00920</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.31	Nonpriority creditor's name and mailing address <b>AMERICAN PETROLEUM CO., INC.</b> <b>P.O. BOX 2529</b> <b>Toa Baja, PR 00951-2663</b> Date(s) debt was incurred <b>APR 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>LUBRICANTS AND FUELS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,250.00</b>

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.32	Nonpriority creditor's name and mailing address <b>AMERICAN STRIPING COMPANY</b> 11551 RAVENVIEW RD Dallas, TX 75253  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.33	Nonpriority creditor's name and mailing address <b>AMERISURE MUTUAL INSURANCE</b> LOCKBOX 730502 Dallas, TX 75373-0502  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.34	Nonpriority creditor's name and mailing address <b>AMTEK INFORMATION</b> P.O. BOX 1832 Tomball, TX 77377-1832  Date(s) debt was incurred <b>MAY TO JUNE 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$270.62
3.35	Nonpriority creditor's name and mailing address <b>AMTRUST NORTH AMERICA</b> P.O. BOX 6939 Cleveland, OH 44101-1939  Date(s) debt was incurred <b>APRIL TO OCTOBER 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>INSURANCE</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,752.00
3.36	Nonpriority creditor's name and mailing address <b>ANCORTEX, INC.</b> 2695 VILLA CREEK DR. SUITE B-1 Dallas, TX 75234  Date(s) debt was incurred <b>OCTOBER 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,873.25
3.37	Nonpriority creditor's name and mailing address <b>ANG CONSTRUCTION, INC.</b> PMB 275 RAFAEL CORDERO SUITE 140 Caguas, PR 00725  Date(s) debt was incurred _____ Last 4 digits of account number <b>2013</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,347.57
3.38	Nonpriority creditor's name and mailing address <b>ANIMAL SERVICES, INC.</b> P.O. BOX 1447 Van Alstyne, TX 75495  Date(s) debt was incurred <b>JANUARY 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,100.00

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.39	Nonpriority creditor's name and mailing address <b>ANN DUFFY INCORPORATED</b> <b>105 CEPHYR COURT</b> <b>Rhame, TX 76078</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.40	Nonpriority creditor's name and mailing address <b>AP ENGINEERING CONSULTANT</b> <b>2964 LBJ FREEWAY</b> <b>SUITE 430</b> <b>Dallas, TX 75234</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.41	Nonpriority creditor's name and mailing address <b>ARGOS READY MIX</b> <b>P.O. BOX 961094</b> <b>Fort Worth, TX 76161-1094</b> Date(s) debt was incurred <b>APRIL 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,970.00</b>
3.42	Nonpriority creditor's name and mailing address <b>ARMANDO GONZALEZ ROBLES</b> <b>KEARBY 4040</b> <b>HALTON CITY, TX 76111</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.43	Nonpriority creditor's name and mailing address <b>ARNOLD PEREZ</b> <b>9031 PINWOOD DR</b> <b>Dallas, TX 75243</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.44	Nonpriority creditor's name and mailing address <b>ART-DRAFT AUTHORITY</b> <b>399 ANDALUCIA AVE.</b> <b>San Juan, PR 00920</b> Date(s) debt was incurred <b>APR 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SIGNS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$83.63</b>
3.45	Nonpriority creditor's name and mailing address <b>AT &amp; T MOBILITY PUERTO RICO</b> <b>P.O. BOX 71514</b> <b>San Juan, PR 00936-8614</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.46	<p>Nonpriority creditor's name and mailing address  <b>ATLANTIC PIPE CORP.</b>  <b>P.O. BOX 366259</b>  <b>San Juan, PR 00936-6259</b></p> <p>Date(s) debt was incurred <u>MAY 2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>CONSTRUCTION MATERIAL</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$1,427.20</b></p>
3.47	<p>Nonpriority creditor's name and mailing address  <b>ATLANTIC QUALITY CONTRACTOR, CORP.</b>  <b>PMB 471 P.O. BOX 8000</b>  <b>Isabela, PR 00662</b></p> <p>Date(s) debt was incurred <u>FROM AUGUST 2015 TO JULY 2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>ELECTRIC ENGINEERING</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$55,696.77</b></p>
3.48	<p>Nonpriority creditor's name and mailing address  <b>ATMOS ENERGY, CORP.</b>  <b>P.O. BOX 841425</b>  <b>Dallas, TX 75284-1425</b></p> <p>Date(s) debt was incurred <u>FEBRUARY TO JULY 2015</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$5,585.19</b></p>
3.49	<p>Nonpriority creditor's name and mailing address  <b>AUSTIN ASPHALT</b>  <b>6330 COMMERCE DRIVE</b>  <b>SUITE 150</b>  <b>Irving, TX 75063</b></p> <p>Date(s) debt was incurred <u>FEBRUARY 2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>CONSTRUCTION MATERIALS</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$4,092.25</b></p>
3.50	<p>Nonpriority creditor's name and mailing address  <b>AUTO ZONE</b>  <b>208 W PIPELINE RD</b>  <b>Hurst, TX 76053</b></p> <p>Date(s) debt was incurred <u>          </u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.51	<p>Nonpriority creditor's name and mailing address  <b>AVANZA CONSTRUCTION &amp; EARTH WORKS, LLC</b>  <b>P.O. BOX 330025</b>  <b>Fort Worth, TX 76163</b></p> <p>Date(s) debt was incurred <u>APRIL TO JULY 2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$101,881.25</b></p>
3.52	<p>Nonpriority creditor's name and mailing address  <b>BADGER DAYLITHING CORP.</b>  <b>75 REMITTANCE DR.</b>  <b>SUITE 3185</b>  <b>Chicago, IL 60675-3185</b></p> <p>Date(s) debt was incurred <u>          </u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.53	<p>Nonpriority creditor's name and mailing address  <b>BANE MACHINERY INC.</b>  <b>P.O. BOX 77859</b>  <b>Fort Worth, TX 76177</b>  Date(s) debt was incurred <b>NOVEMBER 2015 TO JANUARY 2016</b>  Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  Basis for the claim: <b>CONSTRUCTION EQUIPMENT</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$5,283.45</b></p>
3.54	<p>Nonpriority creditor's name and mailing address  <b>BARNSCO</b>  <b>P.O. BOX 541087</b>  <b>Dallas, TX 75354-1087</b>  Date(s) debt was incurred <b>NOVEMBER 2014 TO NOVEMBER 2015</b>  Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  Basis for the claim: <b>CONSTRUCTION MATERIALS</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$37,068.34</b></p>
3.55	<p>Nonpriority creditor's name and mailing address  <b>BARNSCO DECORATIVE CONCRETE SUPPLY, INC.</b>  <b>13860 N. STEMMONS FWY</b>  <b>FARMERS BRANCH, TX 75234</b>  Date(s) debt was incurred <b>JUNE TO OCTOBER 2015</b>  Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  Basis for the claim: <b>CONSTRUCTION MATERIALS</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$399.12</b></p>
3.56	<p>Nonpriority creditor's name and mailing address  <b>BERNALL CONSTRUCTION</b>  <b>3232 LA SOMBRA ST</b>  <b>Grand Prairie, TX 75050</b>  Date(s) debt was incurred <b>APRIL TO MAY 2015</b>  Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$6,609.53</b></p>
3.57	<p>Nonpriority creditor's name and mailing address  <b>BETTERECYCLING CORP.</b>  <b>P.O. BOX 21420</b>  <b>San Juan, PR 00928</b>  Date(s) debt was incurred <b>SEP 2011</b>  Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  Basis for the claim: <b>LUBRICANTS AND FUELS</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$6,000.00</b></p>
3.58	<p>Nonpriority creditor's name and mailing address  <b>BEXAR CONCRETE WORKS</b>  <b>P.O. BOX 700250</b>  <b>San Antonio, TX 78270</b>  Date(s) debt was incurred <b>MARCH TO JUNE 2015</b>  Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  Basis for the claim: <b>LAWSUIT FOR CONCRETE</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$185,745.42</b></p>
3.59	<p>Nonpriority creditor's name and mailing address  <b>BIG CITY CRUSHED CONCRETE</b>  <b>2220 CHEMSEARCH BLVD</b>  <b>SUITE 108</b>  <b>Irving, TX 75062</b>  Date(s) debt was incurred  Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply.  <input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

3.60 Nonpriority creditor's name and mailing address

**BIRKHOFF, HENDRICKS & CART**  
**119 GREENVILLE AVE. S600**  
**Dallas, TX 75243**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.61 Nonpriority creditor's name and mailing address

**BLUE TARP FINANCIAL**  
**P.O. BOX 105525**  
**Atlanta, GA 30348-5525**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.62 Nonpriority creditor's name and mailing address

**BLUELINE RENTAL**  
**P.O. BOX 840062**  
**Dallas, TX 75284-0062**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.63 Nonpriority creditor's name and mailing address

**BOB HILL**  
**212 COOPER DR**  
**Hurst, TX 76053**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.64 Nonpriority creditor's name and mailing address

**BOB WARD JR. EQUIPMENT CO.**  
**6110 CHIPPEWA DR.**  
**Dallas, TX 75212**

Date(s) debt was  
incurred **JANUARY TO MARCH 2016**

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **EQUIPMENT RENTAL**

Is the claim subject to offset? ☒ No ☐ Yes

**\$2,987.70**

3.65 Nonpriority creditor's name and mailing address

**BOBCAT OF FORT WORTH**  
**2727 E LOOP 820 S.**  
**Fort Worth, TX 76119**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.66 Nonpriority creditor's name and mailing address

**BRAVO CONTRACTING**  
**1629 CLARENDON DR**  
**Lewisville, TX 75067**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known) \_\_\_\_\_

3.67	Nonpriority creditor's name and mailing address <b>BURGESS &amp; NIPLE, INC.</b> <b>3950 FOSSIL CREEK BLVD</b> <b>SUITE 210</b> <b>Fort Worth, TX 76137</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.68	Nonpriority creditor's name and mailing address <b>BUYERS BARRICADES</b> <b>P.O. BOX 7498</b> <b>Fort Worth, TX 76111</b> Date(s) debt was incurred <b>MARCH TO NOVEMBER 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>EQUIPMENT RENTAL</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$111,979.15</b>
3.69	Nonpriority creditor's name and mailing address <b>C &amp; M LEGAL SERVICES, PSC</b> <b>P.O. BOX 37</b> <b>Catano, PR 00963</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.70	Nonpriority creditor's name and mailing address <b>C. GREEN SCAPING, LP</b> <b>2401 HANDLEY EDERVILLE</b> <b>Fort Worth, TX 76118</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.71	Nonpriority creditor's name and mailing address <b>CAMERA MUNDI, INC.</b> <b>REPTO INDUSTRIAL CARTAGENA</b> <b>CARR 1 KM 34.1</b> <b>Caguas, PR 00725</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.72	Nonpriority creditor's name and mailing address <b>CANTERA EMILIA</b> <b>APARTADO 75</b> <b>Toa Alta, PR 00954</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.73	Nonpriority creditor's name and mailing address <b>CARLOS GUEL</b> <b>4924 MARKS PLACE</b> <b>Fort Worth, TX 76116</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>



Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known)

Name

3.74	<p>Nonpriority creditor's name and mailing address  <b>CARTER ENERGY</b>  <b>P.O. BOX 29106</b>  <b>Mission, KS 66201-1406</b></p> <p>Date(s) debt was incurred <u>JUNE TO NOVEMBER 2015</u></p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply. <b>\$146,361.44</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>LAWSUIT FOR FUEL</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.75	<p>Nonpriority creditor's name and mailing address  <b>CASHIER C3 TEXAS WORKFORCE</b>  <b>P.O. BOX 149037</b>  <b>Austin, TX 78714-9034</b></p> <p>Date(s) debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>FOR NOTICE ONLY</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.76	<p>Nonpriority creditor's name and mailing address  <b>CAT COMMERCIAL ACCOUNT</b>  <b>P.O. BOX 905229</b>  <b>Charlotte, NC 28290-5229</b></p> <p>Date(s) debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>FOR NOTICE ONLY</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.77	<p>Nonpriority creditor's name and mailing address  <b>CENTERLINE SUPPLY, INC.</b>  <b>530 JESSE ST.</b>  <b>Grand Prairie, TX 75051-1141</b></p> <p>Date(s) debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>FOR NOTICE ONLY</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.78	<p>Nonpriority creditor's name and mailing address  <b>CENTRO AUTOMOTRIZ MATIAS</b>  <b>BOX 604</b>  <b>Lares, PR 00669</b></p> <p>Date(s) debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>FOR NOTICE ONLY</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.79	<p>Nonpriority creditor's name and mailing address  <b>CHARTER COMMUNICATIONS</b>  <b>P.O. BOX 790261</b>  <b>Saint Louis, MO 63179-0261</b></p> <p>Date(s) debt was incurred</p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>FOR NOTICE ONLY</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>
3.80	<p>Nonpriority creditor's name and mailing address  <b>CHEM CAN SERVICES, LLC</b>  <b>16475 DALLAS PARKWAY</b>  <b>SUITE 155</b>  <b>Addison, TX 75001</b></p> <p>Date(s) debt was incurred <u>SEPTEMBER 2015 TO APRIL 2016</u></p> <p>Last 4 digits of account number</p>	<p>As of the petition filing date, the claim is: Check all that apply. <b>\$777.49</b></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u><b>PORTABLE TOILETS</b></u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>



Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.81	Nonpriority creditor's name and mailing address <b>CHICO LIMESTONE. INC.</b> <b>P.O. BOX 636</b> <b>Bridgeport, TX 76426</b> Date(s) debt was incurred <u>SEPTEMBER 2015 TO JANUARY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LAWSUIT FOR CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$64,846.01</b>
3.82	Nonpriority creditor's name and mailing address <b>CHOLO'S ON SITE</b> <b>CALLE JULIO ALVARADO133</b> <b>URB. FRONTERAS</b> <b>Bayamon, PR 00961</b> Date(s) debt was incurred <u>JUNE 2014 TO JULY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>TRAVEL SERVICES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$186,517.57</b>
3.83	Nonpriority creditor's name and mailing address <b>CITY CONCRETE CO.</b> <b>P.O. BOX 890</b> <b>Rhome, TX 76078</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.84	Nonpriority creditor's name and mailing address <b>CITY OF CEDAR HILL</b> <b>285 UPDOWN BLVD</b> <b>BUILDING 100</b> <b>Cedar Hill, TX 75104-3526</b> Date(s) debt was incurred <u>DECEMBER 2014 TO FEBRUARY 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$44.19</b>
3.85	Nonpriority creditor's name and mailing address <b>CITY OF COPPELL</b> <b>255 PARKWAY BOULEVARD</b> <b>Coppell, TX 75019-9478</b> Date(s) debt was incurred <u>DECEMBER 2015 TO MARCH 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$359.09</b>
3.86	Nonpriority creditor's name and mailing address <b>CITY OF FORTH WORTH</b> <b>1000 THROCKMORTON ST</b> <b>Fort Worth, TX 76102</b> Date(s) debt was incurred <u>AUGUST 2015 TO JANUARY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,253.57</b>
3.87	Nonpriority creditor's name and mailing address <b>CITY OF LEWISVILLE</b> <b>P.O. BOX 299002</b> <b>Lewisville, TX 75029-9002</b> Date(s) debt was incurred <u>NOVEMBER 2014 TO JANUARY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$412.50</b>

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.88	Nonpriority creditor's name and mailing address <b>CITY OF MANSFIELD</b> <b>1200 E BROAD ST</b> <b>Mansfield, TX 76063</b> Date(s) debt was incurred <u>JANUARY TO JUNE 2016</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,863.70
3.89	Nonpriority creditor's name and mailing address <b>CITY OF ROANOKE</b> <b>265 MARSHALL CREEK</b> <b>Roanoke, TX 76262</b> Date(s) debt was incurred <u>JULY TO DECEMBER 2015</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,634.50
3.90	Nonpriority creditor's name and mailing address <b>CK GROUP, INC.</b> <b>4108 AMON CARTER BLVD</b> <b>SUITE 206</b> <b>Fort Worth, TX 76155</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.91	Nonpriority creditor's name and mailing address <b>CLP</b> <b>P.O. BOX 5000</b> <b>Aguada, PR 00602</b> Date(s) debt was incurred <u>2008, 2011</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,126.04
3.92	Nonpriority creditor's name and mailing address <b>CMC COMMERCIAL METALS</b> <b>P.O. BOX 844579</b> <b>Dallas, TX 75284-4579</b> Date(s) debt was incurred <u>OCTOBER 2015 TO JANUARY 2016</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$19,155.21
3.93	Nonpriority creditor's name and mailing address <b>CMC CONSTRUCTION SERVICES</b> <b>P.O. BOX 844573</b> <b>Dallas, TX 75284-4573</b> Date(s) debt was incurred <u>JULY 2015 TO JANUARY 2016</u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,474.60
3.94	Nonpriority creditor's name and mailing address <b>CMR CLAIMS DEPARTMENT</b> <b>P.O. BOX 60553</b> <b>Oklahoma City, OK 73146</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.95	Nonpriority creditor's name and mailing address <b>CNA DEDUCTIBLE RECOVERY</b> <b>P.O. BOX 606502</b> <b>Hermitage, PA 16148-1065</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.96	Nonpriority creditor's name and mailing address <b>CNA INSURANCE</b> <b>P.O. BOX 790094</b> <b>Saint Louis, MO 63179-0094</b> Date(s) debt was incurred <b>MAY TO OCTOBER 2015</b> Last 4 digits of account number <b>11E4</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>INSURANCE</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$34,826.66
3.97	Nonpriority creditor's name and mailing address <b>COLONIAL LIFE</b> <b>P.O. BOX 1365</b> <b>Columbia, SC 29202-1365</b> Date(s) debt was incurred <b>DECEMBER 2015 TO FEBRUARY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>INSURANCE</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,013.18
3.98	Nonpriority creditor's name and mailing address <b>COMMERCIAL FLEET FINANCING</b> <b>1445 MCARTHUR DRIVE</b> <b>Carrollton, TX 75007</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.99	Nonpriority creditor's name and mailing address <b>COMMERCIAL METALS COMPANY</b> <b>P.O. BOX 844573</b> <b>Dallas, TX 75284-4573</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.100	Nonpriority creditor's name and mailing address <b>CONTECH ENGINEERED SOLUTIONS</b> <b>2201 W. ROYAL LANE</b> <b>SUITE 170</b> <b>Plano, TX 75025</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.101	Nonpriority creditor's name and mailing address <b>CORA &amp; ASSOCIATES, INC.</b> <b>10357 YORKMERE CT</b> <b>Orlando, FL 32817</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known)

Name

3.102	Nonpriority creditor's name and mailing address <b>COSERV ELECTRIC</b> <b>7701 S. STEMMONS FWY</b> <b>Denton, TX 76210</b> Date(s) debt was incurred <u>JULY 2015</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>UTILITIES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$5,145.15
3.103	Nonpriority creditor's name and mailing address <b>COWSER TIRE &amp; SERVICE</b> <b>1700 NE LOOP 820</b> <b>Fort Worth, TX 76106</b> Date(s) debt was incurred <u>JULY TO DECEMBER 2015</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LAWSUIT FOR TIRES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,893.13
3.104	Nonpriority creditor's name and mailing address <b>COWTOWN REDI MIX CONCRETE</b> <b>P.O. BOX 162327</b> <b>Fort Worth, TX 76161</b> Date(s) debt was incurred <u>NOVEMBER 2015</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,090.00
3.105	Nonpriority creditor's name and mailing address <b>COWTOWN TRAFFIC CONTROL</b> <b>112 JESSAMINE STREET</b> <b>Fort Worth, TX 76110</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.106	Nonpriority creditor's name and mailing address <b>CRAWFORD ELECTRIC SUPPLY</b> <b>10444 N. STEMMONS FREEWAY</b> <b>Dallas, TX 75220</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.107	Nonpriority creditor's name and mailing address <b>CRIM</b> <b>P.O. BOX 195387</b> <b>San Juan, PR 00919-5387</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>5122</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> <u>EIN: 66-0735122</u> <u>EIN: 66-0591654</u> <u>EIN: 66-0591444</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.108	Nonpriority creditor's name and mailing address <b>CROSSROADS, LP</b> <b>5012 DAVID STRICKLAND RD</b> <b>Fort Worth, TX 76119</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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<b>3.109</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CROUCH SAND &amp; GRAVEL</b> <b>P.O. BOX 977</b> <b>Kennedale, TX 76060</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.110</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CRUZ MANHOLE</b> <b>3500 E. MCKINNEY APT 6107</b> <b>Denton, TX 76209</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.111</b>	<b>Nonpriority creditor's name and mailing address</b> <b>CUMMINS SOUTHERN PLAINS</b> <b>3250 NORTH FREEWAY</b> <b>Fort Worth, TX 76111</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.112</b>	<b>Nonpriority creditor's name and mailing address</b> <b>DALLAS LITE &amp; BARRICADE, INC.</b> <b>P.O. BOX 223724</b> <b>Dallas, TX 75222</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.113</b>	<b>Nonpriority creditor's name and mailing address</b> <b>DATA SURVEY, INC.</b> <b>P.O. BOX 7772</b> <b>Coamo, PR 00769</b>  Date(s) debt was incurred <u>JULY 2016</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>SURVEY SERVICES</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$750.00</b>
<hr/>			
<b>3.114</b>	<b>Nonpriority creditor's name and mailing address</b> <b>DAVID MOTOR CRANE SERVICE</b> <b>1212 N. LOOP 12</b> <b>Irving, TX 75061</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.115</b>	<b>Nonpriority creditor's name and mailing address</b> <b>DAVID SENQUIZ</b> <b>PARQUE LAS HACIENDAS</b> <b>CALLE AYMANIO D-15</b> <b>Caguas, PR 00725</b>  Date(s) debt was incurred <u>NOVEMBER TO DECEMBER 2015</u> Last 4 digits of account number ____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.116	Nonpriority creditor's name and mailing address <b>DAYTON SUPERIOR</b> <b>62846 COLLECTIONS CENTER DRIVE</b> <b>Chicago, IL 60693-0268</b> Date(s) debt was incurred <u>DECEMBER 2014</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$289.38</u>
3.117	Nonpriority creditor's name and mailing address <b>DELTA RIGGING &amp; TOOLS</b> <b>1149 W. HURST BLVD</b> <b>Hurst, TX 76053</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.118	Nonpriority creditor's name and mailing address <b>DEPARTMENT OF STATE HEALTH</b> <b>P.O. BOX 12190</b> <b>Austin, TX 78711-2190</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.119	Nonpriority creditor's name and mailing address <b>DESARROLLADORA URBANA LLC</b> <b>PMB 93 RR5 BOX 4999</b> <b>Bayamon, PR 00956-9708</b> Date(s) debt was incurred <u>MAY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$17,895.00</u>
3.120	Nonpriority creditor's name and mailing address <b>DFW INFRASTRUCTURE, INC.</b> <b>P.O BOX 7347</b> <b>Fort Worth, TX 76111</b> Date(s) debt was incurred <u>SEPTEMBER 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,558.75</u>
3.121	Nonpriority creditor's name and mailing address <b>DIVEDCO RENTAL, INC.</b> <b>P.O. BOX 2351</b> <b>Toa Baja, PR 00951-2351</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.122	Nonpriority creditor's name and mailing address <b>ED'S AUTOMOTIVE MACHINE</b> <b>3322 NORTH MAIN STREET</b> <b>Fort Worth, TX 76106</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

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3.123 Nonpriority creditor's name and mailing address  
**EFCO CORP.**  
**25354 NETWORK PLACE**  
**Chicago, IL 60673-1253**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

3.124 Nonpriority creditor's name and mailing address  
**ELECTROMACK**  
**CALLE 7 NUM. 22**  
**BRAULIO DUENO**  
**Bayamon, PR 00959**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

3.125 Nonpriority creditor's name and mailing address  
**EMJ SERVICES**  
**301 W PEMBROKE AVE**  
**Dallas, TX 75208**  
Date(s) debt was incurred SEPTEMBER 2015  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$38,808.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **SERVICES RENDERED**

Is the claim subject to offset? ☒ No ☐ Yes

3.126 Nonpriority creditor's name and mailing address  
**EMPOWER 13 CORP.**  
**P.O. BOX 56**  
**Catano, PR 00963**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

3.127 Nonpriority creditor's name and mailing address  
**EMPRESAS SS, INC.**  
**P.O. BOX 9513**  
**Caguas, PR 00726**  
Date(s) debt was incurred FEBRUARY TO APRIL 2016  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$852.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **SERVICES RENDERED**

Is the claim subject to offset? ☒ No ☐ Yes

3.128 Nonpriority creditor's name and mailing address  
**ENCO MANUFACTURING, CORP.**  
**CALLE BALDORIOTY #43**  
**Cidra, PR 00739**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

3.129 Nonpriority creditor's name and mailing address  
**ENDURANCE REINSURANCE CORP OF AMERICA**  
**750 THIRD AVE FL1819**  
**New York, NY 10017-2703**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes



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3.130	Nonpriority creditor's name and mailing address <b>ENVIRO-AMBIENTAL CORP.</b> <b>P.O. BOX 194202</b> <b>San Juan, PR 00919-4202</b> Date(s) debt was incurred <b>AUGUST 2013 TO NOVEMBER 2015</b> Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,750.01</b>
3.131	Nonpriority creditor's name and mailing address <b>ESC CONSULTANS, INC.</b> <b>P.O. BOX 691447</b> <b>San Antonio, TX 78269</b> Date(s) debt was incurred <b>OCTOBER TO DECEMBER 2015</b> Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,800.00</b>
3.132	Nonpriority creditor's name and mailing address <b>EUROBANK</b> <b>P.O. BOX 191009</b> <b>San Juan, PR 00919</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.133	Nonpriority creditor's name and mailing address <b>EXCEL 4 CONSTRUCTION</b> <b>5733 HART ST.</b> <b>Fort Worth, TX 76112</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.134	Nonpriority creditor's name and mailing address <b>F &amp; R DESIGN GROUP, INC.</b> <b>HC-30 BOX 34205</b> <b>San Lorenzo, PR 00754</b> Date(s) debt was incurred <b>JANUARY TO JULY 2016</b> Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>BLUEPRINTS DESIGN</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$163,213.97</b>
3.135	Nonpriority creditor's name and mailing address <b>FABCO, LLC</b> <b>13835 BEAUMONT HWY</b> <b>Houston, TX 77049</b> Date(s) debt was incurred <b>MARCH TO DECEMBER 2015</b> Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>CONSTRUCTION MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$50,547.91</b>
3.136	Nonpriority creditor's name and mailing address <b>FAMILY SUPPORT PAYMENT CENTER</b> <b>P.O. BOX 109001</b> <b>Jefferson City, MO 65110-9001</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>



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3.137	Nonpriority creditor's name and mailing address <b>FELTS HEAVY DUTY OIL, LLC</b> <b>2412 CULLEN STREET</b> <b>Fort Worth, TX 76107</b> Date(s) debt was incurred <b>JULY TO DECEMBER 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,549.13</b>
3.138	Nonpriority creditor's name and mailing address <b>FERGUSON WATERWORKS</b> <b>P.O. BOX 847411</b> <b>Dallas, TX 75284-7411</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.139	Nonpriority creditor's name and mailing address <b>FERRETERIA BETANCES, INC.</b> <b>P.O. BOX 9208</b> <b>Caguas, PR 00726-9208</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.140	Nonpriority creditor's name and mailing address <b>FERRETERIA Y AGROCENTRO</b> <b>CARR 4494 KM 0.3</b> <b>BO. MORA GUERRERO</b> <b>Isabela, PR 00662</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.141	Nonpriority creditor's name and mailing address <b>FIA CARD SERVICES</b> <b>P.O. BOX 15019</b> <b>Wilmington, DE 19886-5019</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.142	Nonpriority creditor's name and mailing address <b>FIRST INSURANCE FUNDING</b> <b>P.O. BOX 66468</b> <b>Chicago, IL 60666-0468</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.143	Nonpriority creditor's name and mailing address <b>FLEXICORE OF TEXAS</b> <b>P.O. BOX 450049</b> <b>Houston, TX 77245</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.144	Nonpriority creditor's name and mailing address <b>FORD AUTO PARTS</b> <b>P.O. BOX 3141</b> <b>Bayamon, PR 00960-3141</b> Date(s) debt was incurred <u>JULY 2016</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>AUTO PARTS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$627.44
3.145	Nonpriority creditor's name and mailing address <b>FORTERRA</b> <b>P.O. BOX 842481</b> <b>Dallas, TX 75284-2481</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.146	Nonpriority creditor's name and mailing address <b>FORTILINE, INC.</b> <b>P.O. BOX 538388</b> <b>Atlanta, GA 30353-8388</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.147	Nonpriority creditor's name and mailing address <b>FORTSON CONTRACTING</b> <b>772 FM 1126</b> <b>Rice, TX 75155</b> Date(s) debt was incurred <u>JULY 2015</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,421.88
3.148	Nonpriority creditor's name and mailing address <b>FT WORTH WELDERS SUPPLY</b> <b>501 RIVERSIDE DRIVE</b> <b>Fort Worth, TX 76111</b> Date(s) debt was incurred <u>SEPTEMBER 2015 TO JUNE 2016</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$348.85
3.149	Nonpriority creditor's name and mailing address <b>FUGRO CONSULTANTS, INC.</b> <b>P.O. BOX 301083</b> <b>Dallas, TX 75303-1083</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.150	Nonpriority creditor's name and mailing address <b>FULCRO INSURANCE</b> <b>P.O. BOX 9024048</b> <b>San Juan, PR 00902-4048</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.151	Nonpriority creditor's name and mailing address <b>FULCRO INSURANCE OF GA, LLC</b> <b>47 PERIMETER CENTER EAST, #100</b> <b>Atlanta, GA 30346</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.152	Nonpriority creditor's name and mailing address <b>GALINDO TRUCKING</b> <b>11413 SEAGAVILLE RD</b> <b>Balch Springs, TX 75180</b> Date(s) debt was incurred <b>MARCH 2016</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$3,191.32</b>
3.153	Nonpriority creditor's name and mailing address <b>GAMAR TRADING CORP.</b> <b>1525 PONCE DE LEON AVE.</b> <b>EL CINCO IND PARK</b> <b>San Juan, PR 00926</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.154	Nonpriority creditor's name and mailing address <b>GEO SHACK</b> <b>1200 RIVERSIDE DRIVE</b> <b>Fort Worth, TX 76111</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.155	Nonpriority creditor's name and mailing address <b>GEOSOLUTIONS, INC.</b> <b>7011 B WEST BEE CAVE ROAD</b> <b>Austin, TX 78746</b> Date(s) debt was incurred <b>FEBRUARY TO APRIL 2016</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$33,706.82</b>
3.156	Nonpriority creditor's name and mailing address <b>GERDAU DALLAS REINFORCING</b> <b>6440 N. BELT LINE ROAD</b> <b>SUITE 100</b> <b>Irving, TX 75063</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.157	Nonpriority creditor's name and mailing address <b>GJ SEEDING, LLC</b> <b>1080 S. BURLESON BLVD</b> <b>Burleson, TX 76028</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.158	Nonpriority creditor's name and mailing address <b>GLL CORPORATION</b> <b>5934 HARBOR GLEN DR.</b> <b>Dallas, TX 75249</b> Date(s) debt was incurred <u>JANUARY 2014 TO OCTOBER 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,605.13
3.159	Nonpriority creditor's name and mailing address <b>GLOBE ENGINEERS, INC.</b> <b>17819 DAVENPORT RD STE 240</b> <b>Dallas, TX 75251</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.160	Nonpriority creditor's name and mailing address <b>GRAINGER</b> <b>P.O. BOX 419267</b> <b>Kansas City, MO 64141-6267</b> Date(s) debt was incurred <u>NOVEMBER 2014 TO MARCH 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$504.76
3.161	Nonpriority creditor's name and mailing address <b>GRAVERO PEDRITO GONZALO</b> <b>BO. HATO VIEJO</b> <b>SECT. CALICHE</b> <b>Ciales, PR 00638</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.162	Nonpriority creditor's name and mailing address <b>GREEN SCAPING</b> <b>2401 HANDLEY EDERVILLE RD</b> <b>Fort Worth, TX 76118</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.163	Nonpriority creditor's name and mailing address <b>GREGORY V. BLUME</b> <b>7199 W. 98th TERRACE #130</b> <b>Overland Park, KS 66212</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.164	Nonpriority creditor's name and mailing address <b>GREKORY EQUIPMENT CORP.</b> <b>P.O. BOX 192384</b> <b>San Juan, PR 00919-2394</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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<b>3.165</b>	<b>Nonpriority creditor's name and mailing address</b> <b>GSI HIGHWAY PRODUCTS, INC.</b> <b>720 WEST WINTERGREEN RD</b> <b>Hutchins, TX 75141</b>  Date(s) debt was incurred <u>MARCH 2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>CONSTRUCTION MATERIALS</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$120.00</b>
<hr/>			
<b>3.166</b>	<b>Nonpriority creditor's name and mailing address</b> <b>GUILLERMO BURGOS AMARAL</b> <b>P.O. BOX 6496</b> <b>Caguas, PR 00725</b>  Date(s) debt was incurred <u>NOV 2015, MAR 2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>SERVICES RENDERED</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,000.00</b>
<hr/>			
<b>3.167</b>	<b>Nonpriority creditor's name and mailing address</b> <b>GURY'S TRUCKING</b> <b>P.O. BOX 225</b> <b>Ciales, PR 00638</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>FOR NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.169</b>	<b>Nonpriority creditor's name and mailing address</b> <b>GYANT V, LLC</b> <b>P.O. BOX 2182</b> <b>Fort Worth, TX 76113</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>FOR NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.169</b>	<b>Nonpriority creditor's name and mailing address</b> <b>H &amp; D DISTRIBUTORS</b> <b>3236 IRVING BOULEVARD</b> <b>Dallas, TX 75247</b>  Date(s) debt was incurred <u>JUNE 2015 TO APRIL 2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>CONSTRUCTION MATERIALS</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,699.83</b>
<hr/>			
<b>3.170</b>	<b>Nonpriority creditor's name and mailing address</b> <b>HALCO SALES, INC.</b> <b>P.O. BOX 4820</b> <b>Carolina, PR 00984-4820</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>FOR NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>			
<b>3.171</b>	<b>Nonpriority creditor's name and mailing address</b> <b>HALFF ASSOCIATES, INC.</b> <b>P.O. BOX 678316</b> <b>Dallas, TX 75267</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim:</b> <u>LAWSUIT FOR ECOLOGICAL PROTECTION PLAN</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$59,379.95</b>

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3.172 Nonpriority creditor's name and mailing address  
**HAMMER & STEEL, INC.**  
**P.O. BOX 66936**  
**Saint Louis, MO 63166-6936**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLY

Is the claim subject to offset? ☒ No ☐ Yes

3.173 Nonpriority creditor's name and mailing address  
**HANES GEO COMPONENTS**  
**P.O. BOX 60984**  
**Charlotte, NC 28260**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLY

Is the claim subject to offset? ☒ No ☐ Yes

3.174 Nonpriority creditor's name and mailing address  
**HANOVER INSURANCE GROUP**  
**440 LINCOLN STREET**  
**Worcester, MA 01605**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLY

Is the claim subject to offset? ☒ No ☐ Yes

3.175 Nonpriority creditor's name and mailing address  
**HANSON**  
**P.O. BOX 842481**  
**Dallas, TX 75284-2481**  
Date(s) debt was incurred AUGUST 2015  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$17,706.10

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: CONSTRUCTION MATERIALS

Is the claim subject to offset? ☒ No ☐ Yes

3.176 Nonpriority creditor's name and mailing address  
**HARLOW FILTER SUPPLY**  
**4843 ALMOND**  
**Dallas, TX 75247**  
Date(s) debt was incurred OCTOBER 2015  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$102.88

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: CONSTRUCTION MATERIALS

Is the claim subject to offset? ☒ No ☐ Yes

3.177 Nonpriority creditor's name and mailing address  
**HAYNES AND BOONE**  
**P.O. BOX 841399**  
**Dallas, TX 75284-1399**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLY

Is the claim subject to offset? ☒ No ☐ Yes

3.178 Nonpriority creditor's name and mailing address  
**HD SUPPLY CONSTRUCTION**  
**710 FORT WORTH**  
**2037 E LANCASTER**  
**Fort Worth, TX 76103**  
Date(s) debt was incurred JULY 2015 TO JUNE 2016  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$18,327.94

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: CONSTRUCTION MATERIALS

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **BUILDERS HOLDING CO., CORP.**

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3.179	<p>Nonpriority creditor's name and mailing address</p> <p><b>HD SUPPLY WATERWORKS, LT</b>  <b>P.O. BOX 840700</b>  <b>Dallas, TX 75284-0700</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>FOR NOTICE ONLY</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.180	<p>Nonpriority creditor's name and mailing address</p> <p><b>HDS WHITE CAP CONST SUPPLY</b>  <b>P.O. BOX 4852</b>  <b>Orlando, FL 32802-4852</b></p> <p>Date(s) debt was incurred <b>NOVEMBER 2014</b></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>CONSTRUCTION MATERIALS</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$1,823.39</b></p>
3.181	<p>Nonpriority creditor's name and mailing address</p> <p><b>HERMILIO PINA</b>  <b>114 MEVIS LN</b>  <b>Dallas, TX 75232</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>FOR NOTICE ONLY</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.182	<p>Nonpriority creditor's name and mailing address</p> <p><b>HERT'S SERVICE, CO.</b>  <b>P.O. BOX 23</b>  <b>Mansfield, TX 76063</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>FOR NOTICE ONLY</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.183	<p>Nonpriority creditor's name and mailing address</p> <p><b>HERZOG TRANSIT SERVICES, INC.</b>  <b>203 N. BRITAIN RD</b>  <b>Irving, TX 75061</b></p> <p>Date(s) debt was incurred <b>AUGUST 2015</b></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>SERVICES RENDERED</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$3,641.76</b></p>
3.184	<p>Nonpriority creditor's name and mailing address</p> <p><b>HILL COUNTRY SITE SUPPLY</b>  <b>P.O. BOX 342468</b>  <b>Austin, TX 78734</b></p> <p>Date(s) debt was incurred <b>DECEMBER 2015</b></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>SERVICES RENDERED</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$2,965.00</b></p>
3.185	<p>Nonpriority creditor's name and mailing address</p> <p><b>HOLT CAT</b>  <b>P.O. BOX 911975</b>  <b>Dallas, TX 75391-1975</b></p> <p>Date(s) debt was incurred <b>MARCH 2015 TO JULY 2016</b></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <b>EQUIPMENT RENTAL</b></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$158,659.69</b></p>

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Name \_\_\_\_\_

3.186	<p>Nonpriority creditor's name and mailing address</p> <p><b>HOME DEPOT</b>  <b>P.O. BOX 183175</b>  <b>Columbus, OH 43218-3175</b></p> <p>Date(s) debt was incurred <u>SEPTEMBER 2015 TO FEBRUARY 2016</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>CONSTRUCTION MATERIALS</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$25,418.04</u></p>
3.187	<p>Nonpriority creditor's name and mailing address</p> <p><b>HOPPE'S HOT SHOT</b>  <b>P.O. BOX 14783</b>  <b>Haltom City, TX 76117</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$0.00</u></p>
3.188	<p>Nonpriority creditor's name and mailing address</p> <p><b>HORTON BUILDING SUPPLY</b>  <b>514 BISHOP AVENUE</b>  <b>Richardson, TX 75081</b></p> <p>Date(s) debt was incurred <u>MAY 2015</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>CONSTRUCTION MATERIALS</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$1,155.00</u></p>
3.189	<p>Nonpriority creditor's name and mailing address</p> <p><b>IDCSERVO</b>  <b>P.O. BOX 1925</b>  <b>Culver City, CA 90232-1925</b></p> <p>Date(s) debt was incurred <u>MARCH 2015</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$394.37</u></p>
3.190	<p>Nonpriority creditor's name and mailing address</p> <p><b>IDE DISTRIBUTOR CORP.</b>  <b>CARR 845</b>  <b>URB. FAIRVIEW D-38</b>  <b>San Juan, PR 00926</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$0.00</u></p>
3.191	<p>Nonpriority creditor's name and mailing address</p> <p><b>IN THE NEWS</b>  <b>8517 SUNSTATE ST.</b>  <b>Tampa, FL 33634</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$0.00</u></p>
3.192	<p>Nonpriority creditor's name and mailing address</p> <p><b>INEIGHT HARD DOLLAR CORP.</b>  <b>9977 N. 90th STREET</b>  <b>SUITE 200</b>  <b>Scottsdale, AZ 85258</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$0.00</u></p>



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3.193	Nonpriority creditor's name and mailing address <b>INFOSYSTEMS</b> <b>9 ACUARELA ST.</b> <b>URB. MUÑOZ RIVERA</b> <b>Guaynabo, PR 00969</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.194	Nonpriority creditor's name and mailing address <b>INNOVATIVE SOIL SOLUTIONS</b> <b>P.O. BOX 731843</b> <b>Dallas, TX 75373-1843</b> Date(s) debt was incurred <b>JANUARY TO MAY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>CONSTRUCTION MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,025.06</b>
3.195	Nonpriority creditor's name and mailing address <b>INTERNAL REVENUE SERVICE</b> <b>PO BOX 7346</b> <b>Philadelphia, PA 19101-7346</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>TO NOTICE ONLY:</b> <b>EIN: 66-0735122</b> <b>EIN: 66-0591444</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.196	Nonpriority creditor's name and mailing address <b>INTERNATIONAL DEVELOPMENT</b> <b>7900 EAST UNION AVENUE</b> <b>SUITE 1100</b> <b>Denver, CO 80237</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.197	Nonpriority creditor's name and mailing address <b>INTUIT</b> <b>110 HIDDEN LAKE CIRCLE</b> <b>Duncan, SC 29334</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.198	Nonpriority creditor's name and mailing address <b>IPFS CORPORATION</b> <b>P.O. BOX 730223</b> <b>Dallas, TX 75373-0223</b> Date(s) debt was incurred <b>APRIL 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,408.93</b>
3.199	Nonpriority creditor's name and mailing address <b>J &amp; G CONCRETE, LP</b> <b>P.O. BOX 974</b> <b>Waxahachie, TX 75168</b> Date(s) debt was incurred <b>JUNE TO JULY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>CONSTRUCTION MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,808.00</b>

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3.200	Nonpriority creditor's name and mailing address <b>J &amp; H TRUCK SERVICE</b> <b>2411 GATEWAY DRIVE</b> <b>Irving, TX 75063</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.201	Nonpriority creditor's name and mailing address <b>JB STEEL</b> <b>1302 S. MALBOROUGH AVE.</b> <b>Dallas, TX 75208</b>  Date(s) debt was incurred <b>AUGUST 2015</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$959.64</b>
3.202	Nonpriority creditor's name and mailing address <b>JERRY CARRERO</b> <b>P.O. BOX 636</b> <b>Cabo Rojo, PR 00623</b>  Date(s) debt was incurred <b>MAY 2016</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$577.50</b>
3.203	Nonpriority creditor's name and mailing address <b>JESUS F. GONZALEZ</b> <b>4040 KEARBY ST</b> <b>HALTON CITY, TX 76111</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.204	Nonpriority creditor's name and mailing address <b>JM TRUCKING</b> <b>3265 HARDY ST.</b> <b>Fort Worth, TX 76106</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.205	Nonpriority creditor's name and mailing address <b>JOHN GARVIN</b> <b>214 EDGEWOOD DRIVE</b> <b>COPELL, TX 76180</b>  Date(s) debt was incurred <b>JANUARY 2016</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,400.00</b>
3.206	Nonpriority creditor's name and mailing address <b>JOHNSON COUNTY FOAM, INC.</b> <b>565 AIRPORT DR</b> <b>Mansfield, TX 76063</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

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3.207	Nonpriority creditor's name and mailing address <b>JOHNSON COUNTY PIPE, INC.</b> <b>P.O. BOX 203442</b> <b>Dallas, TX 75320-3442</b> Date(s) debt was incurred <b>JULY TO SEPTEMBER 2015</b> Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>CONSTRUCTION MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$325,873.20
3.208	Nonpriority creditor's name and mailing address <b>JOSE B. REYES</b> <b>400 SEMINARY RIDGE</b> <b>Mesquite, TX 75149</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.209	Nonpriority creditor's name and mailing address <b>JOSE DOLORES SOTO JR</b> <b>800 SCHIEFER AVE.</b> <b>Fort Worth, TX 76110</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.210	Nonpriority creditor's name and mailing address <b>JOSE G. ORTIZ</b> <b>1325 N MUNERY RD</b> <b>APT 215 D</b> <b>Irving, TX 75061</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.211	Nonpriority creditor's name and mailing address <b>JOSE L. CUMBAS TORRES</b> <b>AVE BARBOSA 121</b> <b>BOX 37</b> <b>Catano, PR 00963</b> Date(s) debt was incurred <b>APRIL TO JULY 2016</b> Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,035.00
3.212	Nonpriority creditor's name and mailing address <b>JUAN A. ARCE COLECIO</b> <b>3621 MT. RANIER APT 108</b> <b>Dallas, TX 75211</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.213	Nonpriority creditor's name and mailing address <b>JUAN C. MARTINEZ TAPIA</b> <b>3621 MT. RANIER APT 104</b> <b>Dallas, TX 75211</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.214	<p>Nonpriority creditor's name and mailing address</p> <p><b>JUAN C. PIÑERO</b>  <b>URB. CIELO DORADO</b>  <b>85 C-CIELO ESMERALDA</b>  <b>Vega Alta, PR 00692</b></p> <p>Date(s) debt was incurred <u>MAR 2016</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$1,000.00</u></p>
3.215	<p>Nonpriority creditor's name and mailing address</p> <p><b>JUAN RAMIREZ</b>  <b>401 ARCHER AVE.</b>  <b>Dallas, TX 75211</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$0.00</u></p>
3.216	<p>Nonpriority creditor's name and mailing address</p> <p><b>JUNIOR'S MANHOLES CO.</b>  <b>1236 W FELIX STREET</b>  <b>Fort Worth, TX 76115</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$0.00</u></p>
3.217	<p>Nonpriority creditor's name and mailing address</p> <p><b>JUST ENERGY</b>  <b>P.O. BOX 650518</b>  <b>Dallas, TX 75265-0518</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$0.00</u></p>
3.218	<p>Nonpriority creditor's name and mailing address</p> <p><b>JV CONSTRUCTION</b>  <b>26011 FOUNTAINE BLEAU DRIVE</b>  <b>Tomball, TX 77377</b></p> <p>Date(s) debt was incurred <u>JUNE 2016</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$5,903.50</u></p>
3.219	<p>Nonpriority creditor's name and mailing address</p> <p><b>KAISEN UTILITY CONSTRUCTION</b>  <b>HC-02 BOX 5463</b>  <b>Comerio, PR 00782</b></p> <p>Date(s) debt was incurred <u>DEC 2013</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>CONSTRUCTION &amp; ENGINEERING SERVICES</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$35.25</u></p>
3.220	<p>Nonpriority creditor's name and mailing address</p> <p><b>KDAT, LLC</b>  <b>P.O. BOX 200455</b>  <b>Arlington, TX 76006</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><u>\$0.00</u></p>

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<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.221</div> Nonpriority creditor's name and mailing address <b>KIRBY'S RADIATOR SERVICE</b> 2832 E BELKNAP Fort Worth, TX 76111 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.222</div> Nonpriority creditor's name and mailing address <b>KIRBY-SMITH MACHINERY, INC.</b> P.O. BOX 270360 Oklahoma City, OK 73137 Date(s) debt was incurred <b><u>JANUARY TO SEPTEMBER 2015</u></b> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>LAWSUIT FOR HEAVY EQUIPMENT RENTAL &amp; PARTS SALE</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$29,256.83</b>
<hr/>		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.223</div> Nonpriority creditor's name and mailing address <b>KLEINFELDER</b> P.O. BOX 51958 Los Angeles, CA 90051-6258 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.224</div> Nonpriority creditor's name and mailing address <b>L.J.L. PUMPING SERVICE, INC.</b> P.O. BOX 546 Morovis, PR 00687 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.225</div> Nonpriority creditor's name and mailing address <b>LA CASA DE LOS TORNILLOS</b> P.O. BOX 365047 San Juan, PR 00936-5047 Date(s) debt was incurred <b><u>APR-MAY 2016</u></b> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>HARDWARE SUPPLIES</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$277.41</b>
<hr/>		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.226</div> Nonpriority creditor's name and mailing address <b>LA VID TRANSPORTATION</b> 4400 COUNTY ROAD 1123 Godley, TX 76044 Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>FOR NOTICE ONLY</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
<hr/>		
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.227</div> Nonpriority creditor's name and mailing address <b>LATTIMORE MATERIAL CORP.</b> P.O. BOX 732677 Dallas, TX 75373-2677 Date(s) debt was incurred <b><u>APRIL TO JUNE 2016</u></b> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim: <u>CONSTRUCTION MATERIALS</u></b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$123,497.00</b>

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known)

3.228	Nonpriority creditor's name and mailing address <b>LEAF</b> <b>P.O. BOX 644006</b> <b>Cincinnati, OH 45264-4006</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.229	Nonpriority creditor's name and mailing address <b>LEHIGH HANSON HEIDELBERG</b> <b>15620 COLLECTION CENTER DRIVE</b> <b>Chicago, IL 60693-0156</b> Date(s) debt was incurred <b>MARCH TO JULY 2016</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>CONSTRUCTION MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$26,077.61</b>
3.230	Nonpriority creditor's name and mailing address <b>LHOIST NORTH AMERICA</b> <b>801 N. 16th STREET</b> <b>La Porte, TX 77571</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.231	Nonpriority creditor's name and mailing address <b>LINDE GAS PR INC.</b> <b>P.O. Box 71491</b> <b>San Juan, PR 00936-1491</b> Date(s) debt was incurred <b>JULY 2016</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>GAS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$180.43</b>
3.232	Nonpriority creditor's name and mailing address <b>LONGHORN, INC.</b> <b>P.O. BOX 59929</b> <b>Dallas, TX 75229</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.233	Nonpriority creditor's name and mailing address <b>LOURDES M. AVILES RODRIGUEZ</b> <b>LOS DOMINICOS A-29</b> <b>CALLE SANTO TOMAS DE AQUINO</b> <b>Bayamon, PR 00957</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.234	Nonpriority creditor's name and mailing address <b>LUBRICATION ENGINEERS, INC.</b> <b>P.O. BOX 16025</b> <b>Wichita, KS 67216</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.235	<p>Nonpriority creditor's name and mailing address</p> <p><b>M.G. BRYAN EQUIPMENT</b>  <b>1906 S. GREAT SOUTHWEST PKWY</b>  <b>Grand Prairie, TX 75051</b></p> <p>Date(s) debt was incurred <u>NOVEMBER 2015</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$11.00</b></p>
3.236	<p>Nonpriority creditor's name and mailing address</p> <p><b>MADERERA DON ESTEVEZ</b>  <b>P.O. BOX 29228</b>  <b>San Juan, PR 00929-0228</b></p> <p>Date(s) debt was incurred <u>AUGUST 2016</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>CONSTRUCTION MATERIALS</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$31,215.97</b></p>
3.237	<p>Nonpriority creditor's name and mailing address</p> <p><b>MAGNUM MANHOLES</b>  <b>P.O. BOX 1002</b>  <b>Garland, TX 75046</b></p> <p>Date(s) debt was incurred <u>FEBRUARY TO MAY 2015</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$28,593.00</b></p>
3.238	<p>Nonpriority creditor's name and mailing address</p> <p><b>MAPFRE LIFE INSURANCE COMPANY</b>  <b>P.O. BOX 70297</b>  <b>San Juan, PR 00936-8297</b></p> <p>Date(s) debt was incurred <u>FROM JAN-APR 2016</u></p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>INSURANCE</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$4,490.27</b></p>
3.239	<p>Nonpriority creditor's name and mailing address</p> <p><b>MARCOS CALDERON</b>  <b>CALLE 13 AR-7</b>  <b>URB. ALMIRA</b>  <b>Toa Baja, PR 00949</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.240	<p>Nonpriority creditor's name and mailing address</p> <p><b>MARK SHIH</b>  <b>P.O. BOX 2166</b>  <b>Addison, TX 75001-2166</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.241	<p>Nonpriority creditor's name and mailing address</p> <p><b>MARTIN AC &amp; ELECTRICAL</b>  <b>P.O. BOX 546</b>  <b>Tolar, TX 76476-0546</b></p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>



Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

3.242 Nonpriority creditor's name and mailing address  
**MARTIN MARIETTA**  
**P.O. BOX 30013**  
**Raleigh, NC 27622-0013**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

3.243 Nonpriority creditor's name and mailing address  
**MARTIN ROSA**  
**3604 FRAZIER AVE.**  
**Fort Worth, TX 76110**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

3.244 Nonpriority creditor's name and mailing address  
**MATERIALS MANAGEMENT, INC.**  
**2411 GATEWAY DRAIVE**  
**SUITE 115**  
**Irving, TX 75063**  
Date(s) debt was incurred **SEPTEMBER 2015**  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$121.35**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **SERVICES RENDERED**

Is the claim subject to offset? ☒ No ☐ Yes

3.245 Nonpriority creditor's name and mailing address  
**MAX MANUEL BEJARANO**  
**9031 PINWOOD DR**  
**Dallas, TX 75243**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

3.246 Nonpriority creditor's name and mailing address  
**MAXIM**  
**LOCKBOX #774389**  
**4389 SOLUTIONS CENTER**  
**Chicago, IL 60677-4003**  
Date(s) debt was incurred \_\_\_\_  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$0.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

3.247 Nonpriority creditor's name and mailing address  
**MEL'S ELECTRIC, LP**  
**P.O. BOX 40**  
**Wilmer, TX 75172-0040**  
Date(s) debt was incurred **APRIL 2015 TO JULY 2016**  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$94,009.46**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **CONSTRUCTION MATERIALS**

Is the claim subject to offset? ☒ No ☐ Yes

3.248 Nonpriority creditor's name and mailing address  
**MERIT PROFESSIONAL SERVICE**  
**P.O. BOX 271712**  
**FLOWER MOUNG, TX 76053**  
Date(s) debt was incurred **APRIL 2015**  
Last 4 digits of account number \_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

**\$2,850.00**

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **SERVICES RENDERED**

Is the claim subject to offset? ☒ No ☐ Yes



Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

3.249 Nonpriority creditor's name and mailing address

**METROPLEX SAND & GRAVEL**  
**P.O. BOX 185219**  
**Fort Worth, TX 76181-0219**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.250 Nonpriority creditor's name and mailing address

**METROPOLITAN LUMBER & HARDWARE, INC.**  
**P.O. BOX 195579**  
**San Juan, PR 00919-5579**

Date(s) debt was incurred **APR 2016**

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **CONSTRUCTION MATERIALS**

Is the claim subject to offset? ☒ No ☐ Yes

**\$132.67**

3.251 Nonpriority creditor's name and mailing address

**MF SOLUTIONS CORP.**  
**P.O. BOX 10174**  
**San Juan, PR 00908-0174**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.252 Nonpriority creditor's name and mailing address

**MGO TRUCK SERVICES**  
**301 W PEMBROKER AVE.**  
**Dallas, TX 75208**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **FOR NOTICE ONLY**

Is the claim subject to offset? ☒ No ☐ Yes

**\$0.00**

3.253 Nonpriority creditor's name and mailing address

**MIDCO SLING & CABLE CO.**  
**9101 W. CARPENTER FRWY**  
**Dallas, TX 75247**

Date(s) debt was incurred **NOVEMBER 2014 TO NOVEMBER 2015**

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **CONSTRUCTION MATERIALS**

Is the claim subject to offset? ☒ No ☐ Yes

**\$7,613.94**

3.254 Nonpriority creditor's name and mailing address

**MIGUEL A. DIAZ VALLELLANES**

Date(s) debt was incurred **MARCH & JULY 2016**

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **SERVICES RENDERED**

Is the claim subject to offset? ☒ No ☐ Yes

**\$6,173.68**

3.255 Nonpriority creditor's name and mailing address

**MIGUEL A. DIAZ VALLELLANES**  
**EXT LA MILAGROSA**  
**Q13 CALLE 4**  
**Bayamon, PR 00959**

Date(s) debt was incurred **MARCH TO JULY 2016**

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **SERVICES RENDERED**

Is the claim subject to offset? ☒ No ☐ Yes

**\$6,173.68**

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known)

3.256	Nonpriority creditor's name and mailing address <b>MILLENIUUM SIGNS SECTOR EL CINCO #1535 PONCE DE LEON AVE. San Juan, PR 00926</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.257	Nonpriority creditor's name and mailing address <b>MILLICAN WELL SERVICE P.O. BOX 820487 Fort Worth, TX 76112</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.258	Nonpriority creditor's name and mailing address <b>MOBILE PAINT P.O. BOX 717 Theodore, AL 36590</b> Date(s) debt was incurred <b>MAR 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>PAINTS MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,676.00</b>
3.259	Nonpriority creditor's name and mailing address <b>MOCOROA &amp; CASTELLANO, INC. P.O. BOX 1119 Guaynabo, PR 00970-1119</b> Date(s) debt was incurred <b>MAY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>PLUVIAL DRAINAGE</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,300.71</b>
3.260	Nonpriority creditor's name and mailing address <b>MODULAR SPACE CORP 12603 COLLECTIONS CENTER DRIVE Chicago, IL 60693-0126</b> Date(s) debt was incurred <b>JANUARY 2015 TO JULY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>MOBILE RENTALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,115.91</b>
3.261	Nonpriority creditor's name and mailing address <b>MUNICIPALITY OF GURABO P.O. BOX 3020 Gurabo, PR 00778-3020</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.262	Nonpriority creditor's name and mailing address <b>NATIONAL LIFE INSURANCE CO. P.O. BOX 366107 San Juan, PR 00936-6107</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.263	Nonpriority creditor's name and mailing address <b>NATIONAL TRENCH SAFETY</b> <b>P.O. BOX 750963</b> <b>Houston, TX 77075</b> Date(s) debt was incurred <b>AUGUST TO DECEMBER 2015</b> Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>EQUIPMENT RENTAL</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$10,825.59</b>
3.264	Nonpriority creditor's name and mailing address <b>NCS REDI MIX CONCRETE</b> <b>P.O. BOX 185104</b> <b>Fort Worth, TX 76181</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.265	Nonpriority creditor's name and mailing address <b>NCTCOG</b> <b>P.O. BOX 5888</b> <b>Arlington, TX 76005-5888</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.266	Nonpriority creditor's name and mailing address <b>NEENAH FOUNDRY COMPANY</b> <b>P.O. BOX 729</b> <b>Neenah, WI 54957-0729</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.267	Nonpriority creditor's name and mailing address <b>NEFF RENTAL, LLC</b> <b>P.O. BOX 405138</b> <b>Atlanta, GA 30384-5138</b> Date(s) debt was incurred <b>OCTOBER TO NOVEMBER 2015</b> Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>EQUIPMENT RENTAL</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,399.45</b>
3.268	Nonpriority creditor's name and mailing address <b>NEMESIO MIYAR</b> <b>PLAZA CAROLINA STATION</b> <b>P.O. BOX 9532</b> <b>Carolina, PR 00988-9532</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.269	Nonpriority creditor's name and mailing address <b>NEW HOPE L.M. LLC</b> <b>2726 BLYTH DR.</b> <b>Dallas, TX 75228</b> Date(s) debt was incurred <b>JUNE TO JULY 2016</b> Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,329.00</b>

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.270	Nonpriority creditor's name and mailing address <b>NIXON JACK HUBBARD</b> <b>14241 PARKWAY</b> <b>SUITE 575</b> <b>Dallas, TX 75254</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.271	Nonpriority creditor's name and mailing address <b>NORCO MANUFACTURING CORP.</b> <b>P.O. BOX 246</b> <b>Franksville, WI 53126-0246</b>  Date(s) debt was incurred <b>JAN 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>INDUSTRIAL DOOR SYSTEM</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,380.00
3.272	Nonpriority creditor's name and mailing address <b>NORTH TEXAS LANDSCAPING</b> <b>109 PRIVATE RD 4843</b> <b>Haslet, TX 76052</b>  Date(s) debt was incurred <b>OCTOBER 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,437.10
3.273	Nonpriority creditor's name and mailing address <b>NORTH TEXAS TRUCKING, INC.</b> <b>P.O. BOX 542842</b> <b>Dallas, TX 75354</b>  Date(s) debt was incurred <b>AUGUST TO DECEMBER 2015</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$27,926.79
3.274	Nonpriority creditor's name and mailing address <b>NOVA HEALTHCARE, PA</b> <b>P.O. BOX 1299</b> <b>Spring, TX 77373</b>  Date(s) debt was incurred <b>APRIL 2015 TO FEBRUARY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,788.89
3.275	Nonpriority creditor's name and mailing address <b>NOVACOPY, INC.</b> <b>P.O. BOX 372</b> <b>DEPARTMENT 200</b> <b>Memphis, TN 38101</b>  Date(s) debt was incurred <b>SEPTEMBER 2015 TO JUNE 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>OFFICE SUPPLIES &amp; EQUIPMENT</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,739.03
3.276	Nonpriority creditor's name and mailing address <b>NU WAY CONCRETE PUMPING</b> <b>2864 TINSLEY LANE</b> <b>Fort Worth, TX 76179</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor <b>BUILDERS HOLDING CO., CORP.</b>		Case number (if known)
Name		
3.277	Nonpriority creditor's name and mailing address <b>O'ROURKE PETROLEUM</b> <b>P.O. BOX 301150</b> <b>Dallas, TX 75303-1150</b> Date(s) debt was incurred <u>JUNE 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <b>\$17,639.03</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LUBRICANTS AND FUELS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.278	Nonpriority creditor's name and mailing address <b>ODUM SERVICES, LP</b> <b>6555 HARRIS LAKE RD.</b> <b>Marshall, TX 75672</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.279	Nonpriority creditor's name and mailing address <b>OGBURN'S TRUCK PARTS</b> <b>P.O. BOX 4630</b> <b>Fort Worth, TX 76164-0630</b> Date(s) debt was incurred <u>AUGUST TO OCTOBER 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <b>\$413.73</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>TRUCK PARTS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.280	Nonpriority creditor's name and mailing address <b>OLDCASTLE PRECAST, INC.</b> <b>P.O. BOX 742387</b> <b>Los Angeles, CA 90074-2387</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.281	Nonpriority creditor's name and mailing address <b>ORTIZ &amp; ORTIZ TRUCKING, INC.</b> <b>HC-06 BOX 4697</b> <b>Coto Laurel, PR 00780</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.282	Nonpriority creditor's name and mailing address <b>PAISANO REDI MIX</b> <b>1652 HICKS FIELD RD. E</b> <b>Fort Worth, TX 76179</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.283	Nonpriority creditor's name and mailing address <b>PARTNERING FOR SUCCESS</b> <b>4760 PRESTON ROAD #244-364</b> <b>Frisco, TX 75034</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.284 Nonpriority creditor's name and mailing address  
**PAVESTONE, LLC**  
**P.O. BOX 930134**  
**Atlanta, GA 31193-0134**  
Date(s) debt was incurred OCTOBER 2015  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply.

\$763.75

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SERVICES RENDERED

Is the claim subject to offset? ☒ No ☐ Yes

3.285 Nonpriority creditor's name and mailing address  
**PEMCO**  
**P.O. BOX 21420**  
**San Juan, PR 00928-1420**  
Date(s) debt was incurred \_  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLY

Is the claim subject to offset? ☒ No ☐ Yes

3.286 Nonpriority creditor's name and mailing address  
**PIONEER LONGHORN CONCRETE**  
**3485 ROY ORR BLVD**  
**Grand Prairie, TX 75050-4210**  
Date(s) debt was incurred \_  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLY

Is the claim subject to offset? ☒ No ☐ Yes

3.287 Nonpriority creditor's name and mailing address  
**PONCE LAWN SERVICES, INC.**  
**PMB 195/609**  
**TITO CASTRO AVE. SUITE 102**  
**Ponce, PR 00716**  
Date(s) debt was incurred JULY 2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply.

\$1,200.83

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SERVICES RENDERED

Is the claim subject to offset? ☒ No ☐ Yes

3.288 Nonpriority creditor's name and mailing address  
**POT-O-GOLD**  
**15634 WALLISVILLE ROAD**  
**SUITE 800-336**  
**Houston, TX 77049**  
Date(s) debt was incurred AUGUST 2015 TO FEBRUARY 2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

\$2,028.28

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PORTABLE TOILETS AND DUMPSTERS

Is the claim subject to offset? ☒ No ☐ Yes

3.289 Nonpriority creditor's name and mailing address  
**POWER PRECAST PRODUCT CORP.**  
**P.O. BOX 1707**  
**Rio Grande, PR 00745-1707**  
Date(s) debt was incurred FEB 2016  
Last 4 digits of account number \_

As of the petition filing date, the claim is: Check all that apply

\$2,943.60

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: PREFAB CONCRETE

Is the claim subject to offset? ☒ No ☐ Yes

3.290 Nonpriority creditor's name and mailing address  
**PR DEPARTMENT OF LABOR**  
**P.O. BOX 195540**  
**San Juan, PR 00919-5540**  
Date(s) debt was incurred \_  
Last 4 digits of account number 5122

As of the petition filing date, the claim is: Check all that apply.

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLY

EIN: 66-0735122

EIN: 66-0591654

EIN: 66-0591444

Is the claim subject to offset? ☒ No ☐ Yes

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known)

Name

3.291	Nonpriority creditor's name and mailing address <b>PR DEPARTMENT OF TREASURY</b> <b>P.O. BOX 924140</b> <b>San Juan, PR 00902</b> Date(s) debt was incurred _____ Last 4 digits of account number <u>5122</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> <b>EIN: 66-0735122</b> <b>EIN: 66-0591654</b> <b>EIN: 66-0591444</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.292	Nonpriority creditor's name and mailing address <b>PRO BATTERY</b> <b>1019 NORTH HENDERSON ST</b> <b>SUITE 109</b> <b>Fort Worth, TX 76107</b> Date(s) debt was incurred <u>SEPTEMBER 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>BATTERIES SUPPLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$593.95
3.293	Nonpriority creditor's name and mailing address <b>PROFESSIONAL INLINE SERVICE</b> <b>P.O. BOX 118095</b> <b>Carrollton, TX 75011</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.294	Nonpriority creditor's name and mailing address <b>PROGRESSIVE COUNTY MUTUAL</b> <b>P.O. BOX 105428</b> <b>Atlanta, GA 30348-5428</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.295	Nonpriority creditor's name and mailing address <b>PROGRESSIVE WASTE SOLUTIONS</b> <b>FORTH WOTH DISTRICT</b> <b>P.O. BOX 162479</b> <b>Fort Worth, TX 76161</b> Date(s) debt was incurred <u>MARCH 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>WASTE MANAGEMENT</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$149.80
3.296	Nonpriority creditor's name and mailing address <b>PROJECT COMPLIANCE, LLC</b> <b>P.O. BOX 16406</b> <b>Fort Worth, TX 76162-2406</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.297	Nonpriority creditor's name and mailing address <b>PRTC / CLARO</b> <b>P.O. BOX 70366</b> <b>San Juan, PR 00936-8366</b> Date(s) debt was incurred <u>APR 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>TELEPHONE SERVICES</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$84.73



Debtor <b>BUILDERS HOLDING CO., CORP.</b>		Case number (if known) _____
Name _____		
3.298	<b>Nonpriority creditor's name and mailing address</b> <b>PUERTO RICO HYDRAULIC SUPPLIES</b> <b>P.O. BOX 1265</b> <b>Gurabo, PR 00778</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.299	<b>Nonpriority creditor's name and mailing address</b> <b>PUERTO RICO WIRE PRODUCTS</b> <b>P.O. BOX 363167</b> <b>San Juan, PR 00936-3167</b>  Date(s) debt was incurred <u>JUNE 2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$1,768.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: ELECTRICAL MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.300	<b>Nonpriority creditor's name and mailing address</b> <b>R &amp; F ASPHALT UNLIMITED, INC.</b> <b>P.O. BOX 801028</b> <b>Coto Laurel, PR 00780-1028</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.301	<b>Nonpriority creditor's name and mailing address</b> <b>R.B. EVERETT &amp; CO.</b> <b>P.O. BOX 7300</b> <b>Pasadena, TX 77508</b>  Date(s) debt was incurred <u>JUNE 2015</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$130.70</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: EQUIPMENT RENTAL</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.302	<b>Nonpriority creditor's name and mailing address</b> <b>RAILROAD COMMISSION OF TEXAS</b> <b>P.O. BOX 12967</b> <b>Austin, TX 78711-2967</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$0.00</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.303	<b>Nonpriority creditor's name and mailing address</b> <b>RAM JACK DEL CARIBE</b> <b>325 CALLE COLL Y TOSTE</b> <b>San Juan, PR 00918</b>  Date(s) debt was incurred <u>JUL 2015</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$383.75</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: FOUNDATION ENGINEERING</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.304	<b>Nonpriority creditor's name and mailing address</b> <b>RAM TOOL</b> <b>P.O. BOX 743487</b> <b>Atlanta, GA 30374-3487</b>  Date(s) debt was incurred <u>FEBRUARY TO JUNE 2016</u> Last 4 digits of account number _____	<b>As of the petition filing date, the claim is: Check all that apply.</b> <b>\$111,521.71</b> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  <b>Basis for the claim: CONSTRUCTION MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes



Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.305	Nonpriority creditor's name and mailing address <b>RDO EQUIPMENT</b> <b>5301 MARK IV PARKWAY</b> <b>Fort Worth, TX 76131</b> Date(s) debt was incurred <b>FEBRUARY TO APRIL 2016</b> Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>EQUIPMENT RENTAL</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$275.35</b>
3.306	Nonpriority creditor's name and mailing address <b>RDO TRUST #80-5800</b> <b>P.O. BOX 760</b> <b>Fargo, ND 58106-7160</b> Date(s) debt was incurred <b>FEBRUARY TO JULY 2015</b> Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>SERVICES RENDERED</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$655.56</b>
3.307	Nonpriority creditor's name and mailing address <b>READY MIX CONCRETE</b> <b>331 N MAIN STREET</b> <b>Eules, TX 76039</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.308	Nonpriority creditor's name and mailing address <b>REDI-MIX CONCRETE</b> <b>P.O. BOX 844425</b> <b>Dallas, TX 75284-4425</b> Date(s) debt was incurred <b>APRIL TO JULY 2016</b> Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>CONSTRUCTION MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$229,310.91</b>
3.309	Nonpriority creditor's name and mailing address <b>RENE ORTIZ</b> <b>211 E. DAVIS ST.</b> <b>Dallas, TX 75203</b> Date(s) debt was incurred Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.310	Nonpriority creditor's name and mailing address <b>RENTAL ONE</b> <b>P.O. BOX 489</b> <b>Colleyville, TX 76034</b> Date(s) debt was incurred <b>MARCH TO JUNE 2016</b> Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>EQUIPMENT RENTAL</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$8,321.36</b>
3.311	Nonpriority creditor's name and mailing address <b>REPUBLIC SERVICES</b> <b>P.O. BOX 78829</b> <b>Phoenix, AZ 85062-8829</b> Date(s) debt was incurred <b>AUGUST TO OCTOBER 2015</b> Last 4 digits of account number	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>WASTE MANAGEMENT</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,429.75</b>

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known)

3.312	Nonpriority creditor's name and mailing address <b>REYNOLDS ASPHALT &amp; CONST</b> <b>P.O. BOX 370</b> <b>Eules, TX 76039</b> Date(s) debt was incurred <u><b>JULY TO NOVEMBER 2015</b></u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CONSTRUCTION MATERIALS</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$31,870.30
3.313	Nonpriority creditor's name and mailing address <b>RIEMCO</b> <b>P.O. BOX 362529</b> <b>San Juan, PR 00936-2529</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>FOR NOTICE ONLY</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.314	Nonpriority creditor's name and mailing address <b>RINKER MATERIALS</b> <b>P.O. BOX 730197</b> <b>Dallas, TX 75373-0197</b> Date(s) debt was incurred <u><b>FEBRUARY 2016</b></u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>CONSTRUCTION MATERIALS</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$182.36
3.315	Nonpriority creditor's name and mailing address <b>RIVERA COLON &amp; CO. PSC</b> <b>CENTRO INT DE MERCADEO</b> <b>TORRE 1 SUITE 701</b> <b>Guaynabo, PR 00968</b> Date(s) debt was incurred <u><b>JULY TO AUGUST 2016</b></u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>SERVICES RENDERED</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$15,468.00
3.316	Nonpriority creditor's name and mailing address <b>ROAD MACHINERY &amp; SUPPLIES</b> <b>P.O. BOX 86</b> <b>Minneapolis, MN 55486-0749</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>FOR NOTICE ONLY</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.317	Nonpriority creditor's name and mailing address <b>ROAD MASTER STRIPING, LLC</b> <b>1301 SE MCKENNEY</b> <b>Rice, TX 75155</b> Date(s) debt was incurred <u><b>DECEMBER 2015</b></u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>SERVICES RENDERED</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,253.00
3.318	Nonpriority creditor's name and mailing address <b>ROCKING RANCH SUPPLY</b> <b>1600 PARKER RD</b> <b>Carrollton, TX 75010</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u><b>FOR NOTICE ONLY</b></u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **BUILDERS HOLDING CO., CORP.**

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3.319	Nonpriority creditor's name and mailing address <b>RODRIGUEZ READY MIX</b> <b>P.O. BOX 1239</b> <b>Hormigueros, PR 00660</b> Date(s) debt was incurred <u>FROM MAR TO JULY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$6,704.85</b>
3.320	Nonpriority creditor's name and mailing address <b>ROMCO EQUIPMENT CO.</b> <b>P.O. BOX 560248</b> <b>Dallas, TX 75356-0248</b> Date(s) debt was incurred <u>DECEMBER 2015 TO JANUARY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EQUIPMENT RENTAL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,592.19</b>
3.321	Nonpriority creditor's name and mailing address <b>RON WRIGHT TAX ASSESOR</b> <b>P.O. BOX 961018</b> <b>Fort Worth, TX 76161-0018</b> Date(s) debt was incurred <u>NOVEMBER 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$31,725.77</b>
3.322	Nonpriority creditor's name and mailing address <b>RONE ENGINEERING</b> <b>P.O. BOX 226956</b> <b>Dallas, TX 75222</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.323	Nonpriority creditor's name and mailing address <b>ROSS TECHNOLOGY, CORP.</b> <b>BOX 646-98 E. MAIN ST</b> <b>Leola, PA 17540</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.324	Nonpriority creditor's name and mailing address <b>ROTT DIESEL</b> <b>1327 AVE. F.D. ROOSEVELT</b> <b>San Juan, PR 00920</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.325	Nonpriority creditor's name and mailing address <b>RR TECHNOLOGY GROUP</b> <b>P.O. BOX 367924</b> <b>San Juan, PR 00936-7924</b> Date(s) debt was incurred <u>APR-MAY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SOIL TESTING</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$420.92</b>

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Name

3.326 Nonpriority creditor's name and mailing address  
**RUBBER & GASKET CO. OF PR**  
**381 ANGEL BOUNOMO ST**  
**San Juan, PR 00918-1308**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLYIs the claim subject to offset? ☒ No ☐ Yes

3.327 Nonpriority creditor's name and mailing address  
**RUBBER & PLASTIC SPECIALTIES**  
**P.O. BOX 3908**  
**Guaynabo, PR 00970-3908**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLYIs the claim subject to offset? ☒ No ☐ Yes

3.328 Nonpriority creditor's name and mailing address  
**RUBEALCABA ENTERPRISES, INC.**  
**P.O. BOX 210798**  
**Dallas, TX 75211-0798**

Date(s) debt was incurred MARCH 2015

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

\$950.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SERVICES RENDEREDIs the claim subject to offset? ☒ No ☐ Yes

3.329 Nonpriority creditor's name and mailing address  
**S & M TESTING LABORATORY**  
**P.O. BOX 193145**  
**San Juan, PR 00919-3145**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLYIs the claim subject to offset? ☒ No ☐ Yes

3.330 Nonpriority creditor's name and mailing address  
**SAFETY ROUTE**  
**HC 2 BOX 25520**  
**San Sebastian, PR 00685**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLYIs the claim subject to offset? ☒ No ☐ Yes

3.331 Nonpriority creditor's name and mailing address  
**SAGE SOFTWARE, INC.**  
**14855 COLLECTIONS CENTER DR.**  
**Chicago, IL 60693**

Date(s) debt was incurred \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: FOR NOTICE ONLYIs the claim subject to offset? ☒ No ☐ Yes

3.332 Nonpriority creditor's name and mailing address  
**SALUSTIANO SOTO SANTOS**  
**HC-01 BOX 1986**  
**Morovis, PR 00687**

Date(s) debt was incurred APR 2016

Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: *Check all that apply.*

\$342.35

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: SERVICES RENDEREDIs the claim subject to offset? ☒ No ☐ Yes

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.333	Nonpriority creditor's name and mailing address <b>SECRETARY OF STATE</b> <b>P.O. BOX 13697</b> <b>Austin, TX 78711-3697</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.334	Nonpriority creditor's name and mailing address <b>SELECT ENVIRONMENTAL</b> <b>P.O. BOX 732711</b> <b>Dallas, TX 75373-2711</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.335	Nonpriority creditor's name and mailing address <b>SHERWIN WILLIAMS</b> <b>2506 FLORENCE</b> <b>Dallas, TX 75204</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.336	Nonpriority creditor's name and mailing address <b>SI PRECAST CONCRETE</b> <b>5203 IH 45 NORTH</b> <b>Ennis, TX 75119</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.337	Nonpriority creditor's name and mailing address <b>SIGNATURE CONTRACTING SERVICE</b> <b>1510 JELMARK</b> <b>Grand Prairie, TX 75050</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.338	Nonpriority creditor's name and mailing address <b>SILVER CREEK MATERIAL</b> <b>P.O. BOX 150665</b> <b>Fort Worth, TX 76108</b> Date(s) debt was incurred <b>OCTOBER 2015 TO JANUARY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>CONSTRUCTION MATERIALS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,465.00
3.339	Nonpriority creditor's name and mailing address <b>SIX &amp; MANGO EQUIPMENT</b> <b>P.O. BOX 1269</b> <b>Frisco, TX 75034</b> Date(s) debt was incurred <b>JULY 2015 TO JANUARY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>LAWSUIT FOR CONSTRUCTION EQUIPMENT RENTAL</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$106,719.44

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known) \_\_\_\_\_

Name \_\_\_\_\_

3.340	Nonpriority creditor's name and mailing address <b>SOLMARIE COLON ORTIZ</b> <b>HC-71 BOX 7089</b> <b>Cayey, PR 00736</b>  Date(s) debt was incurred <u>APR 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>SERVICES RENDERED</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$14,500.00
3.341	Nonpriority creditor's name and mailing address <b>SOLTERO TRANSPORT, INC.</b> <b>45-A PARABUEYON STREET</b> <b>Cabo Rojo, PR 00623-3109</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>FOR NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.342	Nonpriority creditor's name and mailing address <b>SOUTHERN SAFETY &amp; SUPPLY</b> <b>365 TAFT VINELAND RD STE 100</b> <b>Orlando, FL 32824</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>FOR NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.343	Nonpriority creditor's name and mailing address <b>SOUTHWEST CONSTRUCTION</b> <b>11430 NEWKIRK STREET</b> <b>Dallas, TX 75229</b>  Date(s) debt was incurred <u>OCTOBER 2015 TO FEBRUARY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>SERVICES RENDERED</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90,253.55
3.344	Nonpriority creditor's name and mailing address <b>ST. MARYS NETWORK DISPENSARY</b> <b>1661 N. SWAN RD</b> <b>SUITE 140</b> <b>Tucson, AZ 85712</b>  Date(s) debt was incurred <u>OCTOBER 2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>SERVICES RENDERED</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$148.44
3.345	Nonpriority creditor's name and mailing address <b>STAR TRACTOR, LTD</b> <b>P.O. BOX 163705</b> <b>Fort Worth, TX 76161-3705</b>  Date(s) debt was incurred <u>JULY 2016</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>EQUIPMENT RENTAL</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,640.11
3.346	Nonpriority creditor's name and mailing address <b>STARTEX POWER</b> <b>P.O. BOX 650827</b> <b>Dallas, TX 75265-0827</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>FOR NOTICE ONLY</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **BUILDERS HOLDING CO., CORP.**

Case number (if known)

3.347	Nonpriority creditor's name and mailing address <b>STATE INSURANCE FUND</b> <b>C/O WALLY DE LA ROSA VIDAL, ESQ.</b> <b>PO BOX 365028</b> <b>San Juan, PR 00936-5028</b> Date(s) debt was incurred ____ Last 4 digits of account number <u>5122</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> <u>EIN: 66-0735122</u> <u>EIN: 66-0591654</u> <u>EIN: 66-0591444</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.348	Nonpriority creditor's name and mailing address <b>STEEL AND PIPES, INC.</b> <b>P.O. BOX 5309</b> <b>Caguas, PR 00726-5309</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.349	Nonpriority creditor's name and mailing address <b>STEEL SERVICES &amp; SUPPLIES INC.</b> <b>P.O. BOX 2528</b> <b>Toa Baja, PR 00951-2663</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.350	Nonpriority creditor's name and mailing address <b>STONE RIVER-PHARMACY SOLUTIONS</b> <b>P.O. BOX 504591</b> <b>Saint Louis, MO 63150-4591</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.351	Nonpriority creditor's name and mailing address <b>STUART HOSE AND PIPE COMPANY</b> <b>701 RIVERSIDE DRIVE</b> <b>Fort Worth, TX 76111</b> Date(s) debt was incurred <u>OCTOBER TO DECEMBER 2015</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,913.25</u>
3.352	Nonpriority creditor's name and mailing address <b>SU TIENDA MOPAR</b> <b>P.O. BOX 365044</b> <b>San Juan, PR 00936-6044</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.353	Nonpriority creditor's name and mailing address <b>SUNBELT RENTAL, INC.</b> <b>P.O. BOX 409211</b> <b>Atlanta, GA 30384-9211</b> Date(s) debt was incurred <u>NOVEMBER 2015 TO JUNE 2016</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>EQUIPMENT RENTAL</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$27,194.93</u>



Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.354	Nonpriority creditor's name and mailing address <b>SUNDANCE FENCE &amp; IRON</b> <b>5400 KENNEDALE ST.</b> <b>Fort Worth, TX 76140</b> Date(s) debt was incurred <u>MAY 2016</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ORNAMENTAL IRON PRODUCTS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,071.96</b>
3.355	Nonpriority creditor's name and mailing address <b>SUPER ASPHALT</b> <b>P.O. BOX 1849</b> <b>Guaynabo, PR 00970-1849</b> Date(s) debt was incurred <u>FROM MAR 2009 TO JAN 2016</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>ASPHALT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$74,941.20</b>
3.356	Nonpriority creditor's name and mailing address <b>SUPER AUTOMOTIVE PRODUCTS, INC.</b> <b>P.O. BOX 70250</b> <b>Bayamon, PR 00956-7250</b> Date(s) debt was incurred <u>FEBRUARY 2016</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>AUTO PARTS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$184.65</b>
3.357	Nonpriority creditor's name and mailing address <b>SUPPLY DEPOT</b> <b>P.O. BOX 489</b> <b>Colleyville, TX 76034</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.358	Nonpriority creditor's name and mailing address <b>SURVEYING AND MAPPING, LLC</b> <b>4801 SOUTHWEST PARKWAY</b> <b>SUITE 100</b> <b>Austin, TX 78735</b> Date(s) debt was incurred <u>OCTOBER 2015</u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$825.00</b>
3.359	Nonpriority creditor's name and mailing address <b>SW HORIZONTAL DRILLING</b> <b>4720 FREEMAN DR.</b> <b>Fort Worth, TX 76140</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.360	Nonpriority creditor's name and mailing address <b>SW RODEO TRUCKING INC.</b> <b>P.O. BOX 1331</b> <b>Shawnee, OK 74802</b> Date(s) debt was incurred <u>    </u> Last 4 digits of account number <u>    </u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>



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3.361	Nonpriority creditor's name and mailing address <b>SYSTRONICS</b> <b>P.O. BOX 194030</b> <b>San Juan, PR 00919-4030</b> Date(s) debt was incurred <u>MAR-APR 2016</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>COMPUTERS AND PRINTERS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$211.25
3.362	Nonpriority creditor's name and mailing address <b>TARANGO TRUCKING, LLC</b> <b>P.O. BOX 177786</b> <b>Irving, TX 75017-7786</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.363	Nonpriority creditor's name and mailing address <b>TARRANT APPRAISAL DISTRICT</b> <b>P.O. BOX 185519</b> <b>Fort Worth, TX 76181-0519</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.364	Nonpriority creditor's name and mailing address <b>TARRANT COUNTY TAX OFFICE</b> <b>100 E. WEATHERFORD</b> <b>Fort Worth, TX 76196</b> Date(s) debt was incurred <u>YEAR 2015</u> Last 4 digits of account number <u>3237</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>INTEREST AND PENALTY ON PERSONAL PROPERTY TANGIBLE COMMERCIAL TAXES</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$10,532.94
3.365	Nonpriority creditor's name and mailing address <b>TEXAS BOMANITE</b> <b>11107 MORRISON LANE</b> <b>Dallas, TX 75229</b> Date(s) debt was incurred <u>FEBRUARY 2016</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>CONSTRUCTION MATERIALS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$29,803.50
3.366	Nonpriority creditor's name and mailing address <b>TEXAS CHILD SUPPORT</b> <b>P.O. BOX 659791</b> <b>San Antonio, TX 78265-9791</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.367	Nonpriority creditor's name and mailing address <b>TEXAS COMPTROLLER</b> <b>P.O. BOX 149348</b> <b>Austin, TX 78714-9348</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.368	Nonpriority creditor's name and mailing address <b>TEXAS ENVIRONMENTAL MANAGEMENT</b> <b>P.O. BOX 369</b> <b>Justin, TX 76247</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.369	Nonpriority creditor's name and mailing address <b>TEXAS SAND &amp; GRAVEL</b> <b>P.O. BOX 2158</b> <b>Hurst, TX 76053</b>  Date(s) debt was incurred <b>DECEMBER 2015 TO JANUARY 2016</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>CONSTRUCTION MATERIALS</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,958.40
3.370	Nonpriority creditor's name and mailing address <b>TEXAS SDU</b> <b>P.O. BOX 659791</b> <b>San Antonio, TX 78265-9791</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.371	Nonpriority creditor's name and mailing address <b>TEXAS WATER PRODUCTS, INC.</b> <b>P.O. BOX 8543</b> <b>Fort Worth, TX 76124</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.372	Nonpriority creditor's name and mailing address <b>TEXAS WORK FORCE COMMISSION</b> <b>BOX 591</b> <b>Fort Worth, TX 76101-0591</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.373	Nonpriority creditor's name and mailing address <b>THE BRICKMAN GROUP LTD, LLC</b> <b>1252 W. DOVE RD</b> <b>Southlake, TX 76092</b>  Date(s) debt was incurred <b>MAY 2016</b> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>SERVICES RENDERED</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,425.64
3.374	Nonpriority creditor's name and mailing address <b>THE HANOVER INSURANCE CORP.</b> <b>P.O. BOX 580045</b> <b>Charlotte, NC 28258-0045</b>  Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.375	<p>Nonpriority creditor's name and mailing address</p> <p><b>THE TOWN OF FLOWER MOUND</b>  <b>2121 CROS TIMBERS ROAD</b>  <b>Flower Mound, TX 75028</b></p> <p>Date(s) debt was incurred <u>JANUARY 2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$243.93</b></p>
3.376	<p>Nonpriority creditor's name and mailing address</p> <p><b>THM-TOTAL HIGHWAY MAINTENANCE LLC</b>  <b>930 KCK WAY</b>  <b>Cedar Hill, TX 75104</b></p> <p>Date(s) debt was incurred <u>SEPTEMBER 2015 TO APRIL 2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>SERVICES RENDERED</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$14,741.88</b></p>
3.377	<p>Nonpriority creditor's name and mailing address</p> <p><b>TRAILER BRIDGE, INC.</b>  <b>P.O. BOX 861623</b>  <b>Orlando, FL 32886-1623</b></p> <p>Date(s) debt was incurred <u>          </u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.378	<p>Nonpriority creditor's name and mailing address</p> <p><b>TRANSAMERICA PREMIER LIFE INS</b>  <b>PAYMENT PROCESSING CENTER</b>  <b>DEPARTMENT 35</b>  <b>Denver, CO 80281-0035</b></p> <p>Date(s) debt was incurred <u>          </u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.379	<p>Nonpriority creditor's name and mailing address</p> <p><b>TRANSPORTE RODRIGUEZ ASFALTO</b>  <b>P.O. BOX 1239</b>  <b>Hormigueros, PR 00660</b></p> <p>Date(s) debt was incurred <u>FROM FEB TO APR 2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>ASPHALT</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$2,214.39</b></p>
3.380	<p>Nonpriority creditor's name and mailing address</p> <p><b>TRAPP ONLINE, LLC</b>  <b>7360 E. ACOMA RD #2</b>  <b>Scottsdale, AZ 85260</b></p> <p>Date(s) debt was incurred <u>          </u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>FOR NOTICE ONLY</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$0.00</b></p>
3.381	<p>Nonpriority creditor's name and mailing address</p> <p><b>TRAVELERS CL REMITTANCE</b>  <b>P.O. BOX 660317</b>  <b>Dallas, TX 75266-0317</b></p> <p>Date(s) debt was incurred <u>JANUARY TO MARCH 2016</u></p> <p>Last 4 digits of account number <u>          </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u>INSURANCE</u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	<p><b>\$3,879.18</b></p>

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3.382	Nonpriority creditor's name and mailing address <b>TRIPLE - S VIDA</b> <b>P.O. BOX 363786</b> <b>San Juan, PR 00936-3786</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.383	Nonpriority creditor's name and mailing address <b>TRIPLE-S INSURANCE AGENCY</b> <b>P.O. BOX 72008</b> <b>San Juan, PR 00936-7708</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.384	Nonpriority creditor's name and mailing address <b>TRIUMPH SAVINGS BANK</b> <b>P.O. BOX 1030</b> <b>Bettendorf, IA 52722</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.385	Nonpriority creditor's name and mailing address <b>TROPICAL WORKS</b> <b>F-4 WASHINGTON PARKVILLE</b> <b>Guaynabo, PR 00969</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.386	Nonpriority creditor's name and mailing address <b>TRUCK PRO</b> <b>P.O. BOX 905044</b> <b>Charlotte, NC 28290-5044</b> Date(s) debt was incurred <u>JULY 2015 TO JANUARY 2016</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>TRUCK PARTS</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,359.86
3.387	Nonpriority creditor's name and mailing address <b>TURABO TESTING INC.</b> <b>P.O. BOX 6705</b> <b>Caguas, PR 00726-6705</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.388	Nonpriority creditor's name and mailing address <b>TXI OPERATIONS, LP</b> <b>P.O. BOX 840300</b> <b>Dallas, TX 75284-0300</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>FOR NOTICE ONLY</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.389	Nonpriority creditor's name and mailing address <b>TXU ENERGY</b> <b>P.O. BOX 650638</b> <b>Dallas, TX 75265-0638</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.390	Nonpriority creditor's name and mailing address <b>U.S. LIME COMPANY</b> <b>P.O. BOX 201752</b> <b>Dallas, TX 75320-1752</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.391	Nonpriority creditor's name and mailing address <b>U.S. SHORING &amp; EQUIPMENT</b> <b>11070 S. PIPELINE ROAD</b> <b>Eules, TX 76040-6638</b>  Date(s) debt was incurred <b>FEBRUARY TO MAY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>EQUIPMENT RENTAL</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,671.47
<hr/>			
3.392	Nonpriority creditor's name and mailing address <b>UNITED RENTALS</b> <b>P.O. BOX 700711</b> <b>Atlanta, GA 30384-0711</b>  Date(s) debt was incurred <b>AUGUST 2015 TO JANUARY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>EQUIPMENT RENTAL</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$86,011.70
<hr/>			
3.393	Nonpriority creditor's name and mailing address <b>UNITED SITE SERVICES</b> <b>P.O. BOX 5502</b> <b>Binghamton, NY 13902-5502</b>  Date(s) debt was incurred <b>JULY 2015 TO JULY 2016</b> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>PORTABLE TOILETS</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$8,581.34
<hr/>			
3.394	Nonpriority creditor's name and mailing address <b>UNIVERSAL FINANCE, INC.</b> <b>P.O. BOX 71493</b> <b>San Juan, PR 00936-8593</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
<hr/>			
3.395	Nonpriority creditor's name and mailing address <b>UNLIMITED TRUCKING</b> <b>5800 OLD HEMPHILL RD</b> <b>Fort Worth, TX 76134</b>  Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <b>FOR NOTICE ONLY</b>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

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3.396 Nonpriority creditor's name and mailing address

**VALCARCE CORP.**  
**2139 WETS 60th STREET**  
**Hialeah, FL 33016**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

**\$0.00**Basis for the claim: **FOR NOTICE ONLY**Is the claim subject to offset? ☒ No ☐ Yes

3.397 Nonpriority creditor's name and mailing address

**VANGUARD CARIBE, INV**  
**HC-03 BOX 12603**  
**Penuelas, PR 00624**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

**\$0.00**Basis for the claim: **FOR NOTICE ONLY**Is the claim subject to offset? ☒ No ☐ Yes

3.398 Nonpriority creditor's name and mailing address

**VERIZON C/O CMR CLAIMS DEPT**  
**P.O. BOX 60553**  
**Oklahoma City, OK 73146**

Date(s) debt was

incurred **JANUARY TO DECEMBER 2015**

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

**\$1,187.46**Basis for the claim: **SERVICES RENDERED**Is the claim subject to offset? ☒ No ☐ Yes

3.399 Nonpriority creditor's name and mailing address

**VICTOR E. RIVERA ASSOCIATES, INC.**  
**P.O. BOX 32198**  
**Ponce, PR 00732-2198**

Date(s) debt was

incurred **FROM MAR TO MAY 2016**

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

**\$1,340.00**Basis for the claim: **SOIL SURVEY**Is the claim subject to offset? ☒ No ☐ Yes

3.400 Nonpriority creditor's name and mailing address

**VICTOR GUEL**  
**1200 W FELIX ST**  
**Fort Worth, TX 76115**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

**\$0.00**Basis for the claim: **FOR NOTICE ONLY**Is the claim subject to offset? ☒ No ☐ Yes

3.401 Nonpriority creditor's name and mailing address

**VICTOR S. VARGAS**  
**1288 N. BAGLEY STREET**  
**Dallas, TX 75211**Date(s) debt was incurred **APRIL 2016**

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

**\$1,550.00**Basis for the claim: **SERVICES RENDERED**Is the claim subject to offset? ☒ No ☐ Yes

3.402 Nonpriority creditor's name and mailing address

**VULCAN**  
**P.O. BOX 849131**  
**Dallas, TX 75284-9131**

Date(s) debt was

incurred **FEBRUARY TO SEPTEMBER 2015**

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐
- Contingent
- 
- ☐
- Unliquidated
- 
- ☐
- Disputed

**\$12,817.96**Basis for the claim: **CONSTRUCTION MATERIALS**Is the claim subject to offset? ☒ No ☐ Yes

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.403	Nonpriority creditor's name and mailing address <b>W.O.E. CONSTRUCTION, INC.</b> <b>941-B AVENUE N</b> <b>Grand Prairie, TX 75050</b> Date(s) debt was incurred <u>JULY TO DECEMBER 2015</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>SERVICES RENDERED</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,721.30
3.404	Nonpriority creditor's name and mailing address <b>WARREN DEL CARIBE</b> <b>BO BAIROA</b> <b>ROAD 1 KM 33.3</b> <b>Caguas, PR 00725</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.405	Nonpriority creditor's name and mailing address <b>WASTE MANAGEMENT</b> <b>P.O. BOX 660345</b> <b>Dallas, TX 75246</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.406	Nonpriority creditor's name and mailing address <b>WELFS FARGO CARD SERVICES</b> <b>P.O. BOX 30086</b> <b>Los Angeles, CA 90030-0086</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.407	Nonpriority creditor's name and mailing address <b>WESTERN MARKETING, INC.</b> <b>816 S. BLUE MOUND ROAD</b> <b>SAGINAW, TX 76131-1402</b> Date(s) debt was incurred <u>JULY 2015</u> Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>LUBRICANTS AND FUELS</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,633.33
3.408	Nonpriority creditor's name and mailing address <b>WESTERN RESERVE LIFE ASSURANCE</b> <b>PAYMENT PROCESSING CENTER</b> <b>DEPARTMENT 35</b> <b>Denver, CO 80281-0035</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.409	Nonpriority creditor's name and mailing address <b>WILLBANKS METALS, INC.</b> <b>1155 NE 28th STREET</b> <b>Fort Worth, TX 76106</b> Date(s) debt was incurred ____ Last 4 digits of account number ____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>FOR NOTICE ONLY</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00

Debtor **BUILDERS HOLDING CO., CORP.**  
Name

Case number (if known)

3.410 Nonpriority creditor's name and mailing address  
**WILLIAM G. KOOPMAN**  
**218 EDGEWOOD DRIVE**  
**Coppell, TX 75019**  
Date(s) debt was incurred \_\_\_\_\_  
Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply.

\$1,235.60

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **RESIDENT LAWSUIT FOR DAMAGES**

Is the claim subject to offset? ☒ No ☐ Yes

3.411 Nonpriority creditor's name and mailing address  
**ZACK BURKET CO.**  
**P.O. BOX 40**  
**Graham, TX 76450**  
Date(s) debt was incurred **MAY 2015**  
Last 4 digits of account number \_\_\_\_\_

As of the petition filing date, the claim is: Check all that apply

\$5,419.99

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed

Basis for the claim: **CONSTRUCTION MATERIALS**

Is the claim subject to offset? ☒ No ☐ Yes

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

Total of claim amounts

5a. \$ 467,520.36

5b. + \$ 3,689,977.52

5c. \$ 4,157,497.88



Fill in this information to identify the case:

Debtor name **BUILDERS HOLDING CO., CORP.**United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

## 1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B).

Property

## 2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract \_\_\_\_\_

**MAPFRE PRAICO INSURANCE CO.  
P.O. BOX 70333  
San Juan, PR 00936-8333**

Fill in this information to identify the case:

Debtor name **BUILDERS HOLDING CO., CORP.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.  
☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor

Column 2: Creditor

Name	Mailing Address	Name	Check all schedules that apply:
2.1 ISMAEL CARRASQUILLO SANCHEZ	8624 TRINITY VISTA TRAIL Hurst, TX 76053	ORIENTAL BANK	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.2 ISMAEL CARRASQUILLO SANCHEZ	8624 TRINITY VISTA TRAIL Hurst, TX 76053	ENDURANCE REINSURANCE CORP OF AMERICA	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.129</u> <input type="checkbox"/> G _____
2.3 ISMAEL CARRASQUILLO SANCHEZ	8624 TRINITY VISTA TRAIL Hurst, TX 76053	MAPFRE PRAICO INSURANCE CO.	<input checked="" type="checkbox"/> D <u>2.4</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.4 YAMILLETTE IRIZARRY RIVERA	BO. NAVARRO ROAD 931 KM 6.7 Gurabo, PR 00778	ORIENTAL BANK	<input checked="" type="checkbox"/> D <u>2.5</u> <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____
2.5 YAMILLETTE IRIZARRY RIVERA	BO NAVARRO ROAD 931 KM 6.7 Gurabo, PR 00778	MAPFRE PRAICO INSURANCE CO,	<input type="checkbox"/> D _____ <input type="checkbox"/> E/F _____ <input type="checkbox"/> G _____

Debtor BUILDERS HOLDING CO., CORP.

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

BUILDERS HOLDING CO. CORP.  
dba CD BUILDERS INC.  
dba CDC MAINTENANCE GROUP, CORP.

EXHIBIT A

**Accounts Receivable**

Account Receivable IRS Claim	73,156.58
Account Receivable Oriental Claim	464,767.60
Account Receivable Texas	4,122,471.04
Account Receivable Puerto Rico	1,175,686.32
Allowance for doubtful account	(150,000.00)

NET ACCOUNTS RECEIVABLE \$ 5,686,081.54

**BUILDERS HOLDING CO. CORP.**  
**dba CD BUILDERS INC.**  
**dba CDC MAINTENANCE GROUP, CORP.**

**EXHIBIT B**

Item	FMV unit	QTY	Total
<b>Ciales Contractor's Office</b>			
DESK	50.00	1	\$ 50.00
CHAIRS	15.00	2	30.00
DESK'S CHAIRS	30.00	2	60.00
AIR CONDITIONER UNIT	100.00	1	100.00
TRASH CAN	3.00	1	3.00
WATER TANK	60.00	1	60.00
<b>Ciales Office ACT Inspection</b>			
DESK TABLES	35.00	4	140.00
COMPUTER TABLE	25.00	1	25.00
FILE CABINET	50.00	2	100.00
PLASTIC TABLES	20.00	2	40.00
WATER FOUNTAIN	50.00	1	50.00
CORDLESS PHONE	10.00	1	10.00
PLASTIC & METAL CHAIRS	12.00	9	108.00
DESK'S CHAIRS	30.00	4	120.00
BLUEPRINT CASE	40.00	1	40.00
BOLETIN BOARD	10.00	1	10.00
TRASH CAN	3.00	6	18.00
WOOD TABLE	20.00	1	20.00
<b>Boquerón Office AFI Inspection</b>			
PLASTIC TABLES	20.00	2	40.00
DESKS	25.00	2	50.00
WATER FOUNTAIN	50.00	1	50.00
DESK'S CHAIRS	25.00	3	75.00
FILE CABINET	40.00	1	40.00
BLUEPRINT CASE	40.00	1	40.00
TRASH CAN	3.00	1	3.00
<b>Boquerón Contractor's Office</b>			
DESKS	25.00	1	25.00
PLASTIC TABLE	20.00	1	20.00
PLASTIC CHAIR	10.00	1	10.00
TRASH CAN	3.00	1	3.00
ICE MACHINE	1,500.00	1	1,500.00

**Gurabo Central Office**

DESKS	25.00	6	150.00
PLASTIC TABLES	20.00	7	140.00
DESK'S CHAIRS	30.00	8	240.00
FILE CABINET	60.00	7	420.00
WOOD TABLE	10.00	1	10.00
SOFA	15.00	1	15.00
WATER DISPENSER	50.00	2	100.00
TRASH CAN	3.00	5	15.00

**Texas Central Office**

DESKS	25.00	2	50.00
MODULAR DESKS	80.00	5	400.00
DESK'S CHAIRS	30.00	5	150.00
FILE CABINET	60.00	2	120.00
WATER DISPENSER	50.00	1	50.00
TRASH CAN	3.00	5	15.00
CONFERENCE ROOM TABLE	75.00	1	75.00
CONFERENCE ROOM CHAIRS	10.00	6	60.00

**TOTAL**

**\$ 4,850.00**

dba CD BUILDERS INC.

dba CDC MAINTENANCE GROUP, CORP.

## EXHIBIT C

Item	FMV UNIT	QTY	TOTAL
<b>Ciales Contrator's Office</b>			
LEXMARK Z2300 PRINTER	\$ 50.00	1	\$ 50.00
LEXMARK PRINTER & SCANNER	75.00	1	75.00
LEXMARK PRINTER & SCANNER Z22	50.00	1	50.00
<b>Ciales Office ACT Inspection</b>			
DESKTOP HP PAVILIONP6 SERIES & ACER MONITOR 5201H	300.00	2	600.00
TOSHIBA SATELLITE I755 LAPTOP	200.00	1	200.00
CANON Ir2020 PHOTOCOPIER	65.00	1	65.00
AIR CONDITIONERS	100.00	5	500.00
BATTERY BACKUP	20.00	1	20.00
ETHERNET SWITCH HUB	10.00	1	10.00
CABLES ETHERNET	4.00	4	16.00
<b>Boquerón Office AFI Inspection</b>			
TOSHIBA SATELLITE LAPTOP	200.00	1	200.00
HP LAPTOP	200.00	1	200.00
HP OFFICEJETPRO 8600 PRINTER & SCANNER	75.00	1	75.00
<b>Boquerón Contractor's Office</b>			
COMPAQ PRESARIO A900 LAPTOP	200.00	1	200.00
EPSON PRINTER WF-7510	40.00	1	40.00
<b>Gurabo Central Office</b>			
HP PAVILION DV 6000 LAPTOP	200.00	1	200.00
TOSHIBA L755-S5156 LAPTOP	200.00	1	200.00
UNIVERSAL COMPUTERS WITH MONITORS	200.00	4	800.00
CANON IR2525 PHOTOCOPIER	1,750.00	1	1,750.00
OCE 300 MACHINE	12,500.00	1	12,500.00
BROTHER MFC PRINTER & FAX	40.00	1	40.00
BROTHER 2010 PRINTER	35.00	1	35.00
BATTERY BACKUP	20.00	2	40.00
<b>Texas Central Office</b>			
LAPTOP	150.00	3	450.00
UNIVERSAL COMPUTERS WITH MONITORS	150.00	3	450.00
PHOTOCOPIER	2,250.00	1	2,250.00
BATTERY BACKUP	20.00	2	40.00
<b>TOTAL</b>			<b>\$ 21,056.00</b>

BUILDERS HOLDING CO. CORP.

dba CD BUILDERS INC.

dba CDC MAINTENANCE GROUP, CORP.

EXHIBIT D

## Vehicles in Texas

Item #	Year	Manufacturer	Model	Serial #	Estimated Value
1	2003	Ford	F-150	1FTRW07653KD34243	\$ 3,500.00
2	1999	chevrolet	PK	1GCCS1449XK205597	1,000.00
3	2003	Ford	F-350	1FDWW36P83ED43799	5,000.00
4	1981	Mack	600RD	1M2P139Y4BA008469	16,500.00
5	1983	Mack	TK	1M2P138C2DA010956	5,000.00
6	1985	Mack	DP	1M2P134C8FA011120	15,500.00
7	2000	Freightliner	DP	1FUW8HCA9YHF85529	20,000.00
8	2000	International	TR	2HSFTAMR3YC031433	13,000.00
9	1993	Ford	TR	1FTYS95B6PVA13618	8,500.00
Sub-Total					\$ 88,000.00

## Vehicles in Puerto Rico

Item #	Year	Manufacturer	Model	Description	Estimated Value
1	2004	Ford	Escape	Wagon	\$ 2,300.00
2	1997	Ford	F-350	Van Passenger	2,000.00
3	2003	Ford	F-350	Van Passenger	2,178.00
4	1991	Ford	F-150	Pick-Up	800.00
5	2008	Ford	F-250	Pick-Up	6,500.00
6	1986	Inter	TK	Truck	3,500.00
7	1989	Ford	F-800	Truck	4,000.00
8	1992	Ford	F600	Truck	2,500.00
9	1975	Ford	8000	Service Truck	6,000.00
10	1992	Kenworth	T600	Tractor Truck	1,000.00
11	1988	TRLR	TL	Low Bed Trailer	1,000.00
12				Flatbed Trailer	1,000.00
Sub-Total					\$ 32,778.00

## Construction Equipment

Item #	Year	Manufacturer	Model	Serial #	Estimated Value
1	1999	Trail King	Industrial	1TKC02429XM069432	\$ 7,500.00
2	2004	JLG	UT Trailer	5DYAA17204C000531	7,000.00
3	1978	Fruehauf	Trailer	UNW533802	15,000.00
4	2009	JLG	Trailer	5DYAA19249C004294	6,000.00
5	2010		Utility Trailer	4YMC1218AT033342	1,250.00
6	1999	New Holland	655-E	31021192	14,000.00
7	1998	CAT	416C	4ZN07610	13,500.00
8	1994	New Holland	555D	23804	12,000.00
9	2000	New Holland	LB-75	31024516	12,000.00
10	1999	New Holland	555-E	31024413	12,000.00
11	2004	John Deere	450H	T0450HX926058	28,000.00
12	2002	Komatsu	D65-E	65323	65,000.00
13	1998	Komatsu	PC300 LC-6	31969	30,000.00



Item #	Year	Manufacturer	Model	Serial #	Estimated Value
14	2002	Komatsu	PC200 LC-6	106806	65,000.00
15	1998	Komatsu	PC300 LC-6	31811	45,000.00
16	1998	Hyundai	Robex 200W-2	E402CF10286	20,000.00
17	1997	Skytrack 54'	10054	1973	15,000.00
18	1999	Ingersoll Rand	VR-642B	157164	8,000.00
19		Bobcat	753 G-Series	515832869	2,000.00
20	1998	Ingersoll Rand	SD-70D	155155	13,000.00
21	1998	Bomac	213D3	1.10E+11	18,000.00
22		Gomaco	Grinder Finisher pav	MC18655-08	7,500.00
23	1987	Komatsu	GD-525A-1	60010	25,000.00
24		Ingersoll Rand	185105	303073UGJ222	2,500.00
25		Atlas Cop	XAS185-(JD)	4500A101X7R021980	2,500.00
26		EZ Drill	Concrete Drill	N2156	1,000.00
27		Target	Portacut IV	352038	1,200.00
28		Target	Quanta Q1200	349264	2,500.00
29		Target	PRO-66	440048	5,000.00
30		Night hawk	LT-12	LT-3636	800.00
31		Allmand	NLPRO	0522PRO06	1,500.00
32		Lincoln		9422306	1,000.00
33		Lincoln	D AMP/ RANGER 30	U1051210366	3,000.00
34		Terramite	Screed Pavers	27RS0304	2,500.00
35		Gomaco	Screed Pavers	903700-051	2,125.00
36		Solar Tech	MB-2248	4GM2M151881409643	10,000.00
37		Solar Tech	MB-2248	4GM2M151781409794	10,000.00
38		Allmand	2200 APF	0039AB02	5,500.00
39		Allmand	AWB25-5574-1724	0501AB07	5,500.00
40		Bobcat	6707144	714419179	1,000.00
41		All Power	Gas generator	29D11U110012	500.00
42		Home Lite	Gas generator	DNN07220276	500.00
43		Sakai	1 Ton	50133	2,000.00
44		MQP	P33/24HHMR	1536607	5,424.00
45		Mod Safe	HQ 8 X 20	2045606	19,500.00
46		Mod Safe	Pro 8 X 20	2046607	8,000.00
47	1995	Home	Trailer		1,250.00
48	2007	AZTRA	Trailer	1A9BU08207T751096	1,250.00
Sub-Total					\$ 537,799.00

## Heavy Equipment

Item #	Year	Manufacturer	Model	Serial #	Estimated Value
1	2000	INTER	TR	2HSFTAMR3YC031433	\$ 11,900.00
2	1993	Ford	TR	1FTYS95B6PVA13618	8,900.00
3	1999	New Holland	655-E	31021192	12,000.00
4	1998	CAT	416C	4ZN07610	15,000.00
5	1994	New Holland	555D	23804	10,000.00
6	2004	John Deere	450H	T0450HX926058	29,000.00
7	2002	Komatsu	D65-E	65323	68,000.00
8	1998	Komatsu	PC300 LC-6	31969	51,000.00
9	2002	Komatsu	PC200 LC-6	106806	64,000.00
10	1998	Komatsu	PC300 LC-6	31811	51,000.00
11	1998	Hyundai	Robex 200W-2	E402CF10286	17,000.00
12	2011	Komatsu	PC350LC-8	A10332	174,000.00

Item #	Year	Manufacturer	Model	Serial #	Estimated Value
13	2011	Komatsu	PC350LC-8	A10494	174,000.00
14	1997	Skytrack 54'	10054	1973	13,000.00
15	1999	Ingerso Rand	VR-642B	157164	13,000.00
16		Bobcat	753 G-Series	515832869	3,000.00
17	2013	Komatsu	WA320-7	80101	153,000.00
18	1998	Ingerso Rand	SD-70D	155155	11,000.00
19	1998	Bomaq	213D3	1.10E+11	15,000.00
20		Gomaco	inder Finisher pav	MC18655-08	6,000.00
21	2014	Gomaco	Track Concrete Pav	912400-028	475,000.00
22	1987	Komatsu	GD-525A-1	60010	2,000.00
23		MQP	P33/24HHMR	1536607	2,500.00
Sub-Total					\$ 1,379,300.00

GRAND TOTAL \$ 2,037,877.00

**Fill in this information to identify the case:**

Debtor name **BUILDERS HOLDING CO., CORP.**

United States Bankruptcy Court for the: **DISTRICT OF PUERTO RICO**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 207**

**Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy**

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income**

**1. Gross revenue from business**

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

**From the beginning of the fiscal year to filing date:**  
From **1/01/2016** to **Filing Date**

**Sources of revenue**  
Check all that apply

**Gross revenue**  
(before deductions and exclusions)

☒ Operating a business

**\$5,455,652.56**

☐ Other \_\_\_\_\_

**For prior year:**  
From **1/01/2015** to **12/31/2015**

☒ Operating a business

**\$17,400,407.00**

☐ Other \_\_\_\_\_

**For year before that:**  
From **1/01/2014** to **12/31/2014**

☒ Operating a business

**\$0.00**

☐ Other \_\_\_\_\_

**2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

**Description of sources of revenue**

**Gross revenue from each source**  
(before deductions and exclusions)

**Part 2: List Certain Transfers Made Before Filing for Bankruptcy**

**3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.

**Creditor's Name and Address**

**Dates**

**Total amount of value**

**Reasons for payment or transfer**  
Check all that apply

**4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

or consigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☒ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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5. **Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. **Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments**

7. **Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. CARTER ENERGY, A DIVISION OF WORLD FUEL SERVICES, INC. VS. CD BUILDERS, INC. 16LA01619	K.S.A. CHAPTER 61	DISTRICT COURT OF JOHNSON COUNTY, KANSAS 100 N. KANSAS AVENUE Olathe, KS 66061	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.2. KEVIN DAVIS INDUSTRIAL, INC. D/B/A COWSER TIRE & SERVICE VS. CD BUILDERS, INC. 2016-001690-2	Civil	TARRANT COUNTY, TEXAS COUNTRY COURT AT LAW NO. 2 100 W. WEATHERFORD ST., ROOM 250 Fort Worth, TX 76196-0401	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.3. SIX & MANGO EQUIPMENT LLP VS. CD BUILDERS INC, et al DC-16-01480	Civil	DISTRICT COURTS OF DALLAS, COUNTY TEXAS 191ST DISTRICT COURT 600 COMMERCE STREET STE 101 Dallas, TX 75202	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.4. KIRBY-SMITH MACHINERY, INC. VS. CD BUILDERS, INC. et al 236-284900-16	Civil	TARRANT COUNTY, TEXAS 100 N. CALHOUN Fort Worth, TX 76196-0402	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor **BUILDERS HOLDING CO., CORP.**

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Case number (if known)

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.5. CHICO LIMESTONE, INC. VS. CD BUILDERS, INC. 2016-002591-1	Civil	TARRANT COUNTY TEXAS COUNTRY COURT AT LAW NO. 1 100 W WEATHERFORD ST ROOM 250 Fort Worth, TX 76196	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.6. HALFF ASSOCIATES, INC. VS. CD BUILDERS, INC. DC-16-06285	Civil	DISTRICT COURT OF DALLAS, COUNTY TEXAS 191ST DISTRICT COURT 600 COMMERCE STREET STE 101 Dallas, TX 75202	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.7. TARRANT COUNTY, ET AL V. CD BUILDERS, INC. 048-D09088-16	Civil	TARRANT COUNTY Fort Worth, TX 76181	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.8. WILLIAM G. KOOPMAN V. CD BUILDERS, INC. JS16-00622A	Civil	JUSTICE OF THE PEACE PRECINT 3 PLACE 1 Dallas, TX 75229-6071	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
7.9. BEXAR CONCRETE WORKS I, LTD V. CD BUILDERS, INC. C-16-02990-A	Civil	COUNTY COURT OF DALLAS COUNTY COURT AT LAW NO. 1 Dallas, TX 75229	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None**Part 4: Certain Gifts and Charitable Contributions**

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses**

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☐ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
THEFT ON PREMISES, ASSORTED CONSTRUCTION TOOLS	<p>If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.</p> <p>List unpaid claims on Official Form 106A/B (Schedule A/B: Assets - Real and Personal Property).</p> <p>\$3,446.26</p>	11/16/2015	\$4,926.26

Debtor **BUILDERS HOLDING CO., CORP.**

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Case number (if known)

**Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	<b>MONGE ROBERTIN &amp; ASSOCIATES</b> <b>97 ACOSTA STREET</b> <b>Caguas, PR 00725</b>		<b>YEAR 2016</b>	<b>\$7,862.40</b>
	Email or website address			
	Who made the payment, if not debtor?			

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.  
Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
14.1. <b>9008 TRINITY BLVD</b> <b>FT WORTH, TX 76053</b>	

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☐ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

**Nature of the business operation, including type of services the debtor provides**

If debtor provides meals and housing, number of patients in debtor's care

## Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

## Part 10. Certain Financial Accounts, Safe Deposit Boxes, and Storage Units

### 18. Closed financial accounts

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

- None

Financial Institution name and Address

Last 4 digits of  
account number

Type of account or instrument

Date account was  
closed, sold,  
moved, or  
transferred

Last balance  
 before closing or  
 transfer

### 19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

- ☐
- None

Depository institution name and address

Names of anyone with access to it  
Address

### Description of the contents

Do you still have it?

## 20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

- ☐
- None

Facility name and address

Names of anyone with access to it

### Description of the contents

Do you still have it?

## Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own

21. Property held for another

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

- ☐
- None



**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business**

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
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26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address	Date of service From-To
26a.1. RIVERA COLON & CO. PSC CENTRO INT DE MERCADEO TORRE 1 SUITE 701 Guaynabo, PR 00968	

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.



☐ None**Name and address**

26b.1. **RIVERA COLON & CO. PSC**  
**CENTRO INT DE MERCADEO**  
**TORRE 1 SUITE 701**  
**Guaynabo, PR 00968**

**Date of service**  
**From-To**

**AS OF DECEMBER**  
**31, 2015**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None**Name and address**

**If any books of account and records are**  
**unavailable, explain why**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☒ None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.

**Name of the person who supervised the taking of the**  
**inventory**

**Date of inventory**

**The dollar amount and basis (cost, market,**  
**or other basis) of each inventory**

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

**Name****Address**

**Position and nature of any**  
**interest**

**% of interest, if**  
**any**  
**50%**  
**BUILDERS**  
**HOLDING CO.**  
**CORP**

**ISMAEL CARRASQUILLO**  
**SANCHEZ**

**8624 TRINITY VISTA TRAIL**  
**Hurst, TX 76053**

**PRESIDENT**

**Name****Address**

**Position and nature of any**  
**interest**

**% of interest, if**  
**any**  
**50%**  
**BUIDLDERS**  
**HOLDING CO.**  
**CORP**

**YAMILLETTE IRIZARRY**  
**RIVERA**

**BO NAVARRO CARR 931 KM 6.7**  
**Gurabo, PR 00778**

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No☐ Yes. Identify below.**30. Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☒ No☐ Yes. Identify below.

Debtor **BUILDERS HOLDING CO., CORP.**

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Case number (if known)

Name and address of recipient

Amount of money or description and value of property

Dates

Reason for providing the value

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
- ☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
- ☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 20, 2016/s/ ISMAEL CARRASQUILLO SANCHEZ

Signature of individual signing on behalf of the debtor

ISMAEL CARRASQUILLO SANCHEZ

Printed name

Position or relationship to debtor PRESIDENTAre additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
- ☐ Yes

B2030 (Form 2030) (12/15)

**United States Bankruptcy Court**  
**District of Puerto Rico**

In re **BUILDERS HOLDING CO., CORP.**

Debtor(s)

Case No.

Chapter **11**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<u><b>0.00</b></u>
Prior to the filing of this statement I have received .....	\$	<u><b>6,000.00</b></u>
Balance Due .....	\$	<u><b>0.00</b></u>

2. The source of the compensation paid to me was:

☒ Debtor      ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor      ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**August 20, 2016**

*Date*

**/s/ LCDO. FAUSTO DAVID GODREAU USDC**

**LCDO. FAUSTO DAVID GODREAU USDC 123207 PR**

*Signature of Attorney*

**Godreau & Gonzalez Law**

**Calle McCleary 1806**

**Suite 1-B**

**San Juan, PR 00902**

**(787) 982-6507**

**dg@g-lawpr.com**

*Name of law firm*

**United States Bankruptcy Court  
District of Puerto Rico**

In re **BUILDERS HOLDING CO., CORP.**

Debtor(s)

Case No.

Chapter **11**

**CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)**

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **BUILDERS HOLDING CO., CORP.** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

☒ None [*Check if applicable*]

August 20, 2016

Date

/s/ LCDO. FAUSTO DAVID GODREAU USDC

LCDO. FAUSTO DAVID GODREAU USDC 123207 PR

Signature of Attorney or Litigant

Counsel for **BUILDERS HOLDING CO., CORP.**

**Godreau & Gonzalez Law**

**Calle McCleary 1806**

**Suite 1-B**

**San Juan, PR 00902**

**(787) 982-6507**

**dg@g-lawpr.com**

United States Bankruptcy Court  
District of Puerto Rico

In re **BUILDERS HOLDING CO., CORP.**

Debtor(s)

Case No.

Chapter **11**

**LIST OF EQUITY SECURITY HOLDERS**

Following is the list of the Debtor's equity security holders which is prepared in accordance with rule 1007(a)(3) for filing in this Chapter 11 Case

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
ISMAEL CARRASQUILLO-BUILDERS HOLDING	COMMON	50%	OWNER
YAMILLETTE IRIZARRY RIVERA-BUILDERS HOLD	COMMON	50%	OWNER

**DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP**

I, the **PRESIDENT** of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date **August 20, 2016**

Signature **/s/ ISMAEL CARRASQUILLO SANCHEZ**  
**ISMAEL CARRASQUILLO SANCHEZ**

*Penalty for making a false statement of concealing property:* Fine of up to \$500,000 or imprisonment for up to 5 years or both.  
18 U.S.C. §§ 152 and 3571.

**United States Bankruptcy Court  
District of Puerto Rico**

In re **BUILDERS HOLDING CO., CORP.**

Debtor(s)

Case No.

Chapter

**11**

**VERIFICATION OF CREDITOR MATRIX**

I, the PRESIDENT of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **August 19, 2016**

**/s/ ISMAEL CARRASQUILLO SANCHEZ**

**ISMAEL CARRASQUILLO SANCHEZ/PRESIDENT**

Signer/Title